

BOWL FOR FUN!!!

**EDISON RECREATION IN ASSOCIATION WITH STELTON LANES
SPONSORS A WEEKLY BOWLING PROGRAM
FOR BOYS & GIRLS BETWEEN THE AGES OF 5 & 14**

This activity will be conducted on Fridays at 4PM OR 6PM

Stelton Lanes
1665 Stelton Road
Piscataway

(Approximately 1 mile from the Recreation Office)

***BUMPERS AVAILABLE FOR YOUNGER BOWLERS
(NO GUTTERBALLS!)***

This is an 8 week program which runs from
Friday, **OCTOBER 11th, 2019** through Friday, **December 13th, 2019**
(Extended Due to Weather and School Holidays – No Bowling Nov. 8th and Nov. 29th)

**TOTAL COST ONLY \$69
(Price Includes \$5 Registration Fee)**

PROGRAM INCLUDES:

- 2 Games of Bowling Each Week
- Use of Rental Shoes and Lightweight Bowling Balls
- 8 Free Game Passes at the End of Program

If you would like your son/daughter to participate in this program, please fill out the registration form with a check payable to **1665 Stelton License LLC**, and return to Stelton Lanes by October 10th. You may also pay with a credit card or debit card at the bowling center.

(Adult/Parent Supervision Required)

If you have any additional questions regarding this program, please call Stelton Lanes at 732-985-BOWL (2695).



Name of Child _____ Age _____ D.O.B. _____

Address _____ City _____ Zip _____

I hereby give permission for myself/my child to participate in this activity and assume the risk thereof and I do agree for myself/my child at all times to keep the said Recreation Department, Personnel and the Township of Edison free, and harmless and indemnified, from any and all liability for any injury I/my child might sustain as the result of said participation. Photographs, videotapes and audio recording of the participant, while participating in a Recreation Department program, may be made. I hereby permit, consent and authorize such materials of myself/my son/my daughter as an individual or part of a group with or without text, to be used for Edison Township Recreation Activities. It is further understood and agreed that Edison Township does not provide any insurance coverage for the participant or organization.

Parent's Signature _____ Phone or Cell # _____

Teammates (if known) or we will place you on a team:

Check One: ___ 4PM ___ 6PM

2) _____

3) _____

**EDISON TOWNSHIP DEPARTMENT OF RECREATION
Thomas Lankey, Mayor * Edison Township Council
Joyce Fircha, Acting Director**