

EDISON RECREATION'S



TOWER OF TERROR

TRAIL OF HORROR & HARVEST FUN

DATE: SATURDAY – OCTOBER 19, 2019

HARVEST FUN

TIME: 3:00 PM TO 6:00 PM
 COST: HARVEST FUN - NON -PERISHABLE FOOD
 (MUST BRING WITH REGISTRATION FORM)

TRAIL OF HORROR

TIME: 6:30 PM TO 9:00 PM
 COST: \$3.00 PER PERSON - DONATION TO THE TOWER
 PAYABLE AT THE EVENT

PLACE: THOMAS EDISON CENTER AT MENLO PARK
 37 CHRISTIE STREET, EDISON, NJ
 (Free Parking Along Street)

The timid and frail of heart can join us for some HARVEST FUN, which will include a DJ, Music, Games, Pumpkin Decorating, a Magic Show at 5:00 p.m., a Family Pumpkin Carving Contest from 3:00 p.m. to 6:00 p.m., Face Painting and Vendors & Exhibitors. You must be pre-registered to attend the Harvest Fun Event and/or participate in the pumpkin carving contest, which will be limited to the first 15 families who register. You bring the carving tools and we will supply the pumpkin. The below registration form can be submitted to the Recreation Dept., 100 Municipal Blvd., Edison or the Minnie B. Veal Community Center, 1070 Grove Ave., Edison along with your non-perishable food items.

For the daring and courageous, with the assistance of the Edison High School Drama Club, we bring you the TRAIL OF HORROR. As you walk down the trail, your nerves will be tested as you are greeted by several frightening sights and circumstances. Children under 12 must be accompanied by an adult. Registration required. You may pre-register or register the day of the event, however, PAYMENT WILL ONLY BE ACCEPTED AT THE EVENT. Trail of Horror is first come first served, starting at 7:00 pm in groups of 12 people.

For additional information, contact the Recreation Office at 732-248-7310.

I will attend/participate in the following:

Harvest Fun _____
 Pumpkin Carving _____
 Trail of Terror _____ Number in Group _____

RECEIVED _____
EMPLOYEE'S INITIALS _____

LAST NAME _____

HOME ADDRESS _____ ZIP _____

PHONE HOME _____ CELL _____ E-MAIL ADDRESS _____

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, 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 recordings of the participant, while participating in an Edison Recreation Department Program may be made. I hereby permit consent and authorize such materials of myself/my son/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.

PARTICIPANT/GUARDIAN SIGNATURE _____ DATE _____