

Don't Bug Me

Preschoolers learn lots of cool bug facts. Create your very own bug filled snow globe. Don't worry mom will allow these creepy crawlers in the house.



Register by September 18.

Activity: 310128

Who: Youth, ages 3-5

When: Monday, September 25
6:15-7:45 pm

Where: Davis Community Center
Golden Valley

Fee: \$18

Shopkins Cute

Grab your shopping carts and let's get creating! It's time to join those cute collectibles with the adorable faces and unique names. We will be making lots of fun "treats" including a Berry Smoothie and Lolli



Poppins out of air-dry clay and paint. Bring a nut free snack and drink. Register by October 2.

Activity: 310125

Who: Youth, ages 5-9

When: Monday, October 9
6-8 pm

Where: Davis Community Center
Golden Valley

Fee: \$27

FYI: For more information or to register please check online at <https://webtrac.robbinsdalemn.com> or you can check our website: www.robbinsdalemn.com.

Mail/drop off waiver form with payment to Robbinsdale City Hall, 4100 Lakeview Ave. N, Robbinsdale, MN 55422.

Call 763-531-1278, Monday-Friday, between 8:30 am and 4:00 pm. using VISA, MC or Discover. Refunds, program credits or transfers are allowed up to registration deadline. All refunds are subject to a \$5 service fee. Confirmations are not sent. Participants should attend the class unless informed it has filled or been cancelled. No refunds after the deadline. Payment by check authorizes the city to use information from your check to make a one-time electronic transfer from your account to process the payment.

Don't Bug Me & Shopkins Cute Registration & Waiver Form

Please print clearly. Make checks payable to City of Robbinsdale; 4100 Lakeview Avenue No., Robbinsdale, MN 55422

Youth's Name _____ Birthdate: _____ Grade: _____

Indicate Choice: **Don't Bug Me** **Shopkins Cute**

Total AMT: \$ _____ Please list any special needs or equipment participant may need: _____

Contact's Name: _____ Phone (H) _____ (W or cell) _____

Contact's email: _____ ADDRESS _____

CITY _____ ZIP _____ Payment: CASH CHECK CREDIT CARD

Credit Card Number: _____ 3 or 4 Security Code: _____ Expiration Date: _____

Card Holders Signature: _____

Liability Waiver: The undersigned acknowledges that recreational and sports programs involve inherent risks of personal injury. It is agreed that participation in the program is voluntary and at the participant's sole risk. The City shall not be liable for any claims, demands, injuries or damages whatsoever to the participant or participant's property arising out of the participant's participation in the program. On behalf of the participant, the undersigned releases and discharges the City, its employees or agents from all such claims, demands, injuries or damages, except those directly caused by the gross negligence of the City, its employees or agents. **Photographs** are occasionally taken and may be used for promotional purposes of the recreation programs we offer. Do not wish to be photographed, check here ____

Signature Participant or guardian, if participant is under 18 : _____ **Date:** _____