

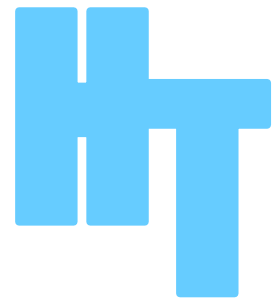


Township of Howell

PO Box 580 • 4567 Highway 9 North
(732) 938-4500 ext. 2106 • www.twp.howell.nj.us

*Howell Township Residents Only
Proof of Residency Required
Completed K - 5th Grade*

2021 Registration & Emergency Form



Middle School South



(Please Print Clearly)

Child's Name _____ Current School _____

Street Address _____ Zip Code _____

Phone # _____ Cell # _____ E-mail _____

Birth Date _____ Age _____ Sex _____ Current Grade (9/2020 - 6/2021) _____

Emergency Contacts: *(Please Provide Alternate Contact Persons)*

Name _____ Relation _____ Phone _____

Name _____ Relation _____ Phone _____

Is Child Currently On Medication? _____ Specify _____

Medical Or Other Allergies? _____ Specify _____

** The Township of Howell Accident Insurance Policy maintained by the Township is secondary in coverage. Any and all claims must first be submitted to the claimant's primary health insurance carrier.*

*** I grant the Township of Howell the right to use any and all photographs of myself and/or my child participating in a Township sponsored activity. By registering with the Township of Howell, I acknowledge that I have read, understood, and agreed with the above disclaimer.*

(Signature Of Parent / Legal Guardian)

(Date)

CASH _____ CHECK # _____ RECEIVED BY _____ RECEIPT # _____



The S.T.A.R. Programs are for children with Special Needs.
Participants must complete an additional registration packet.

Early Registration Fee: \$300.00 → Register May 10th - May 21st

Registration Fee: \$325.00 → Register May 24th - May 28th

Late Fee: An additional \$25.00 fee

Special activities and trips are additional costs

Register by mail or online ONLY at www.howellrec.org (convenience charges apply)

Program Dates: Monday, June 28th - Friday, July 30th

Program Hours: Doors OPEN 8:30am - Doors CLOSE 2:30pm



All refunds are governed by the Township of Howell Refund Guidelines and Procedures

