



# **SAFETY TOWN 2017**

## **SPONSORED BY THE OLMSTED EARLY CHILDHOOD PTA**

Do you have a child starting Kindergarten in the fall? If so, Safety Town is a child accident prevention program for incoming kindergarteners. It is a program that introduces safety awareness and preventative procedures to the children. Children practice real life situations before being confronted with situations on their own. Safety Town is the foundation of safety education.

Safety Town in Olmsted Falls and Olmsted Township is organized through the Olmsted Early Childhood PTA, a non-profit organization consisting of volunteers who seek to unite home, school and the Olmsted community in promoting education, health and safety of children, youth and families. Children who attend will practice safety "out on the town." We have a miniaturized city layout designed to teach children safety near roads and railroad crossings while on their bikes or walking in their neighborhood. Videos, songs and lessons with visits from local Police, Fire and Bus Departments as well as fieldtrips to Police and Fire Departments, all help your child enjoy and understand what he or she is learning.

Dates and times are listed on the attached form. Safety Town is held at FALLS/LENOX PRIMARY SCHOOL.

**Registration opens March 1, 2017. We will only be accepting payment by mail. Please be aware that class sizes are limited and will be filled based upon date payment is received. Payment reserves your child's spot and must be received by May 15, 2017.**

**Fee: THE FEE INCLUDES THE COST OF THE CLASS AND A SAFETY TOWN T-SHIRT**  
\$40.00 per child if received **before April 15, 2017 for OECPTA members**  
\$45.00 per child if received **before April 15, 2017 for NON-members** \$50.00 per  
child if postmarked **after April 15, 2017 for everyone**

**CHECKS SHOULD BE MADE PAYABLE TO: Olmsted Early Childhood PTA**

Please complete the attached forms and mail with your payment to:

**Olmsted Early Childhood PTA/Safety Town**

**c/o Kimberly Wrobel**

**9667 Kingston Trail**

**Olmsted Township, OH 44138**

You will be notified by email of your child's class session and time. Please include Emergency Information Form when mailing in registration. If you have any questions please send an email to

[OECPTA1@gmail.com](mailto:OECPTA1@gmail.com)

\*SAFETY TOWN IS FUNDED BY YOUR FEES AND SUBSIDIZED THROUGH OECPTA AND BENEFACTORS WHO DONATE THROUGH THIS PTA. DONATIONS ARE ALWAYS ACCEPTED. YOU ARE WELCOME TO CONTACT THE OECPTA WITH YOUR THOUGHTFUL DONATION.

**Olmsted Early Childhood PTA  
Safety Town 2017**

**Registration Form**

Child's name: \_\_\_\_\_  
Child's address: \_\_\_\_\_  
\_\_\_\_\_  
Child's phone number: \_\_\_\_\_  
Parent Name: \_\_\_\_\_  
Email Address: \_\_\_\_\_

Youth T-Shirt Size: \_\_\_\_\_  
XS(4-5) S(6-8) M(10-12) L(14-16)

Please number the following sessions in order of your first through last choice. Please note that each session is 5 days long, which includes graduation on Friday. Each class will have approximately 30 students and classes are filled as registrations are received. (Morning classes do fill up quickly)

Session 1: June 5-9, 2017  
\_\_\_\_ 9:00-11:30 am  
\_\_\_\_ 12:30-3:00 pm

Session 2: June 12-16, 2017  
\_\_\_\_ 9:00-11:30 am  
\_\_\_\_ 12:30-3:00 pm  
\_\_\_\_ 6:00-8:30 pm

Session 3: June 19-23, 2017  
\_\_\_\_ 9:00 - 11:30 am  
\_\_\_\_ 12:30-3:00 pm

\_\_\_\_ My child can attend any session/time (please check if appropriate)

**PAYMENT IS NON-REFUNDABLE IF YOU CANCEL. YOUR PAYMENT MUST BE INCLUDED WITH THE REGISTRATION FORM TO RESERVE YOUR CHILD'S SPOT IN A CLASS.**

Please complete and sign below:  
During Safety Town your child will be given a School Bus orientation and then ride the bus to our Police and Fire Departments for a lesson and tour.

I \_\_\_\_\_ give permission for \_\_\_\_\_  
(Parent signature) (Child's Name)  
to attend the Safety Town Fieldtrip.

Please mail to: **Olmsted Early Childhood PTA/Safety Town  
c/o Kimberly Wrobel  
9667 Kingston Trail  
Olmsted Township, OH 44138**

**DEADLINE IS May 15, 2017 If you have any questions please email us at [OECPTA1@gmail.com](mailto:OECPTA1@gmail.com)**

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Safety Town 2017**

**Emergency Information**

Child's name \_\_\_\_\_

Birthday \_\_\_\_\_

Parent(s)/Guardian(s) Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Please list any allergies that your child has (i.e. bee stings, food, medication, etc)

\_\_\_\_\_  
\_\_\_\_\_

Please list any medication your child is currently taking \_\_\_\_\_

Please list any special needs your child has

\_\_\_\_\_

Please list 2 people we can contact in case of an emergency:

1) Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Relation to child \_\_\_\_\_

2) Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Relation to child \_\_\_\_\_

Please list the names of individuals who are permitted to pick up your child from Safety Town

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Physician's Name and Telephone Number: \_\_\_\_\_  
\_\_\_\_\_

Do we have permission to send your child to the nearest hospital in case of emergency? Please circle and sign. YES NO

Signature \_\_\_\_\_ Date \_\_\_\_\_