Adaptive Recreation "Shadow" Program

The Adaptive Recreation Program provides trained volunteers to "shadow" children during most recreation programs. The shadow works with the specific needs of the child to help him or her participate more comfortably within the parameters of the program.

STUDENT Shadow Registration Form

Please fill out form completely and print clearly

Name: _____

Address: _____

Home Phone #_____

Your Cell Phone # _____

E-Mail: _____

Grade (Please circle one) 8th 9th 10th 11th 12th Age:_____

Emergency Contact Name: _____

Emergency Contact Phone #: _____

Availability: Please Circle Day(s): Sun Mon Tues Weds Thurs Fri Sat

Time(s) Available: _____

Parental Consent:

I give my child permission to act as a shadow for Senior, Youth, and Leisure Services

_____ _____ _____

Parent's Signature Name Date

Please return form to: Adaptive Recreation Coordinator

SYLS Dept, 204 Hillside Ave, Livingston, NJ 07039.

Questions - Call: 973-535-7925, ext. 403