

Babysitter's Training

This American Red Cross course provides youth ages 11 to 15, with the knowledge, skills and confidence they need to be great babysitters, plus real-world experiences to help them develop their leadership and communication abilities. The course is fun and fast-paced with hands-on activities, exciting video, role-plays and lively discussions. It teaches young people how to: *care for children and infants, *be a good leader and role model, *make good decisions, *solve problems and stay safe, *communicate effectively with parents, *handle emergencies such as illnesses, injuries and household accidents and *learn business skills such as writing a resume and interviewing for a job. Students should bring a bag lunch. *Deadline to register is one week prior to the class.*



Course 7079: Saturday, March 24

Time: 8 a.m.-4:30 p.m.

Location: New Hope City Hall, 4401 Xylon Ave N

Fee: \$72 New Hope residents
\$79 Nonresidents

Register with: New Hope Parks and Recreation
4401 Xylon Avenue North
New Hope, MN 55428

Refunds, program credits and transfers are allowed up to one week prior to the start of the program. In the event of illness or injury, refunds will be given when accompanied by a doctor's written verification. All refunds are subject to a \$5 service fee. Confirmations are not sent. Payment by check authorizes the city to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. Phone registrations accepted with a major credit card. Call 763-531-5151.

Online Registration! Go to www.ci.new-hope.mn.us and click on **Rec Express**. You will need a Password and Client ID number to register online. Call 763-531-5151 to obtain this information.



www.facebook.com/newhoperecreation

Babysitter's Training - March 24, 2012 (7079)

Name _____ Phone(h) _____ (w) _____

Address _____ City _____ Zip _____

Birthdate _____ Sex (M or F) _____ Email _____

Does participant have a special need? _____

Course Number _____ Date _____ Amount Enclosed \$ _____

Amer Express/Discover/MC/Visa # _____ Exp Date _____

I, the undersigned parent or guardian, authorize the City of New Hope to disclose to the City's insurer, attorney, staff, coaches, and other personnel involved in this program, the participant's name, address and telephone number for the purpose of program administration. I understand that the records are protected under state and federal privacy regulations and cannot be disclosed without my written consent unless otherwise provided by law. I hereby agree to allow the individual named herein to participate in the aforementioned activity, and agree to hold the City harmless for any claim resulting from participation in this activity. I further give consent for any photos or videos taken during the program to be used by the City for promotional materials.

Parent/Guardian Signature _____ Date _____