

PRESCHOOL WORKSHOPS



Preschoolers, ages 3-6 with an adult, will enjoy engaging demonstrations, perform simple experiments, and will discover how science can help us better understand the world around us!

Location: Crystal Community Center, 4800 Douglas Drive

Time: 10-11 a.m.

Fee: \$8 per child per session residents of New Hope, Crystal & Robbinsdale
\$12 per child per session nonresidents

Dandy Dinosaurs—Thursday, January 19 Course: 7130

Discover how those huge reptiles lived, what they had for dinner and what may have caused them to disappear. As junior paleontologists, take part in a simulated dinosaur dig. Take home a cast of a Tyrannosaurus Rex tooth.
Register by January 11.



Magnetic Attractions—Thursday, March 15 Course: 7131

You'll be "mysteriously drawn" this class. Experience more about magnets by experimenting with magnetic poles and color your own Mad Science magnet to take home. Register by March 7.



Register in person or mail a check to:

New Hope Parks & Recreation
4401 Xylon Avenue North
New Hope, MN 55428

By Phone with a major credit card
763-531-5151

Online: www.ci.new-hope.mn.us
You will need a client ID and password.
Call 763-531-5151 to obtain these numbers

Refunds, program credits or transfers are allowed up to one week prior to start of the program. 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 or to process the payment as a check transaction.

MadScience Workshops—Winter 2012

Name _____ Phone (H) _____ (C) _____

Address _____ City _____ Zip _____

Birthdate _____ Age _____ Sex M or F _____ Amount Enclosed: \$ _____

Special Needs? _____ Email Address _____

_____ Dandy Dinosaurs (7130)

_____ Magnetic Attractions (7131)

I, the undersigned participant, authorize the City of New Hope to disclose to the City's insurer, attorney, staff, 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 further 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 in promotional materials.

Parent/Guardian Signature _____ Date _____