

End-of-Year "Pajama Party"

When: **Wednesday, June 2**

Time: **5:00-7:30 p.m.**

Where: **Rib Mountain Montessori**
5201 Lilac Avenue

Suggested Donation: **\$15/first child**
\$10/additional child



The kids asked for another PJ Movie Night...
So here's your chance to enjoy one last
Parents' Night Out before the school year ends.

Drop off your child(ren) in their pajamas. (Or stay & join them if you wish.)
Donation includes dinner (pizza & juice), activities, a movie with popcorn, & more.*
If you'd like to have your child bring a DVD, the kids can vote on which movie they'd like to watch.

PLEASE RETURN THE REGISTRATION FORM BY FRIDAY, MAY 28.

Montessori teachers & parent volunteers will supervise.
All proceeds will benefit the Montessori educational program.

For details, call **842-9540**.

Registration forms are also available at www.wimontessori.com (under School Announcements).

* Kids with allergies should bring their own snacks/epi-pens.



----- (Keep top of page for Date/Contact info) -----

Montessori End-of-Year "Pajama Party" REGISTRATION FORM

Name(s): _____

Number attending: _____ Children _____ Adults
Suggested donation: \$15 first child; \$10 each person thereafter. Cash or checks, please

Contact/Cell Number (____) _____ Emergency Number (____) _____
Best number for during movie time Number other than contact number

Please make checks payable to: **Montessori Educational Center**
[a 501(3)(c) nonprofit corporation]

Donation Amount Enclosed \$ _____

Participation in the above activities is strictly voluntary. In consideration of the above listed child(ren)'s participation in this event, I hereby release and discharge, indemnify, defend and hold harmless Montessori Children's Village, Rib Mountain Montessori, and other individuals and entities contributing support to these activities, from any liability for damage to or loss of personal property, sickness, injury from whatever sources, legal entanglements, imprisonment, death, loss of money, etc., which might occur as a result of the above listed child(ren)'s participation in these activities. I agree not to sue and forever release those named above from all liability for any and all damages (without limitations). I have read, understand, & agree to this Assumption of Risk & Waiver of Liability.

Parent(s) Signature: _____ Print Name(s): _____ Date: _____