



Township of West Milford

Community Services & Recreation
1810 Macopin Road
West Milford, NJ 07480-1303
(973) 728-2871
Fax: (973) 728-6934

TEEN CENTER REGISTRATION/PERMISSION FORM GRADES 5-6

REGISTRATION IS LIMITED TO WEST MILFORD
RESIDENTS

Name: _____ grade _____

Address: _____

Parents phone: _____

Email: _____

Allergies/medical information (if necessary)

Parents signature: By signing you agree to allow your child to attend the Teen Center on designated Friday nights, check website for updates, (westmilford.org, [deptatments/Community Services & Recreation](http://deptatments/Community%20Services%20&%20Recreation)), that you will have transportation home no later than 10:00PM and be reachable by phone while child is attending

Parent Signature

Date