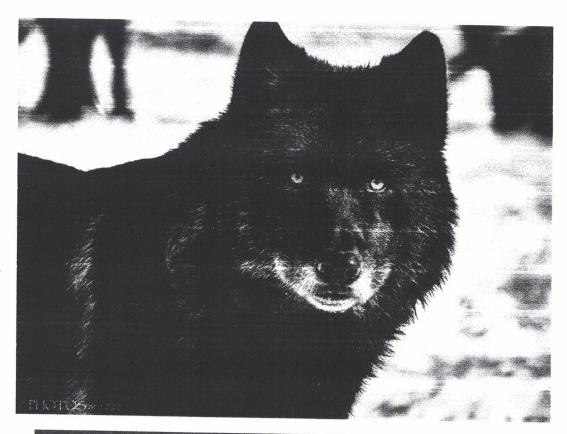
Wolf Mountain Nature Center

Address: 562 Hopkins Crandall Road, Smyrna, NY 13464
Visit: https://www.thewolfmountainnaturecenter.org/



Town of Plymouth Youth and Family Trip

18th annual Honoring the Spirit of the Wolf Celebration Sunday, October 13, 2024

11 am - 4 pm

All youth (17 years and under) are IRME and must be accompanied by a parent/guardian, and provide own transportation. Adults 18 and over pay discount price of only \$5 per ticket. First 50 people limit.

All Tickets Include 1 Coupon for Hotdog, Chips, and Drink at Kandi's Kitchen Food Truck.

Forms available outside on the wall at town hall or via email request to shelly.ndodge@gmail.com. Registration Sheets, with payment will be accepted until 3PM September 30, 2024 at the town hall, in town clerk mail slot, No postage required. No refunds

Tickets can be picked up in person October 9th from 5:00 to 6:00 at the town hall

Any Questions call or text Shelly Ciborowski at 607-316-9111

Email shelly.ndodge@gmail.com

Town of Plymouth Trip Registration Form

my for Trip to):	
	Fmail:	
	bettern	
3		
Age	Gender	Phone-email
Parent Mandatory Engagement – Due to state requirements and the individuality of each participant, it is required that each youth be accompanied by their parent/guardian or a supervising adult. Any child that is not accompanied by an adult will not be permitted to attend. Parent Permission Slip & Liability Waiver – I hereby, allow my son/daughter/ward, for whom I am the legal guardian, to attend/participate in the event sponsored by the Town of Plymouth. Release: I hereby agree my child/ren may participate in the above stated event. I further agree to waive and release any claims I might have on behalf of myself or my child/ren for personal injury, property damage, property loss or death. I discharge and release the Town of Plymouth, its officials, agents, employees, and volunteers from liability: which may exist because of my child/ren's participation in the event. I have read this Release and understand it's terms. I hereby sign this release voluntarily and with full knowledge of its significance.		
		Date
Office Use Only		
Ch	ieck/Mo#	Amount Paid
Approved by Parent sign when tickets picked up		
	Age ment — Due to accompanied by ill not be permitional in the even in the ev	ment – Due to state requirement accompanied by their parent/gualill not be permitted to attend. iability Waiver – I hereby, allowing the event sponsored by the sponsored by th