

Tots and Toddlers Music Time

What is it: A chance for our little ones to gather and make music in an outdoor environment. We'll be drumming, singing, moving, and exploring music on the lawn at The Comm. Age appropriate music activities will be used to enhance childhood developmental milestones. Masks are required for everyone 2 and older. Please bring your own chairs and practice social distancing.

Where: Waverly Community House Lawn. Make-up classes will be offered if there is inclement weather. Please provide a reliable email address and phone number for notifications.

Cost: \$10 per session, per child. Includes a sanitized instrument pack to use during the session. Return after.

Who: Summit Music Therapy, Cheryl Mozdian, music therapist and music educator.

When: Please check classes you'd like to attend. All classes serve ages 6 months to 5 years old.

Thursdays, 6:00 – 6:45 pm	
August 27 _____	September 10 _____
September 24 _____	October 1 _____
# of Children you're registering _____	\$ Total _____

Saturdays, 10:30 – 11:15 am	
August 29 _____	September 12 _____
September 26 _____	October 3 _____
# of Children you're registering _____	\$ Total _____

REGISTRATION FORM

Name: _____

Address: _____

Email: _

Parent/Guardian Name: _

Day Phone: _

Alternate Phone: _

Please fill out the following:

Emergency Contact Name: _

Phone: _

Release: *I/we do not, will not hold Cheryl J. Mozdian, Mt-BC or any individual associated with the Tots and Toddlers Music Time Program. The Waverly Community House or its employees, Board of Trustees, volunteers or Waverly Township responsible for any accident or injury incurred by my child(ren) or myself while participating in this program.*

Parent/Guardian Name (please print):

Parent/Guardian Signature:

CALL THE COMM OFFICE FOR DETAILS!

THE PHONE # IS: 570.586.8191, EXT. 2

Make checks payable to **The Waverly Community House** and return to: **Waverly Community House, P O Box 142, Waverly PA 18471.**

Method of Payment:

check cash VISA MC Discover

Credit Card #:

Expiration Date: _

CVV: _

Cardholder Signature:

Check/MO #: _

Amt: \$ _