



A Youth Group

For 3rd-5th Graders

BLOCK PARTY: LEGO® Engineering Workshop



Feldman Horn Mercaz

Sunday, February 12, 11:45 AM-2:15 PM

\$25 per child (includes lunch)

CLUB 345 participants will have tons of fun as they learn to design and build motorized machines and architectural projects that may include catapults, pyramids, demolition derby cars, truss and suspension bridges, buildings and other constructions. They will explore concepts in physics, mechanical engineering, structural engineering and architecture—all while playing with their favorite creations. This is a hands-on and minds-on workshop suitable for LEGO® novices and “maniacs alike. Taught by Play-Well Teknologies.

Please return the attached waiver and payment to the School Office by Tuesday, January 31.

**For more information, call Allison Lattman at
(818) 763-9148, ext. 141 or email alattman@tbhla.org.**

Please note that this activity is INSTEAD of the bowling trip originally planned for that day.

Temple
BethHillel 12326 Riverside Drive · Valley Village, California 91607
phone (818) 763-9148 · fax (818) 763-3865 · www.tbhla.org



WAIVER FORM FOR CLUB 345 LEGO ENGINEERING WORKSHOP

Please complete and return by Tuesday, January 31 with \$25.00 fee.

Student's Name: _____ Grade: _____ Teacher: _____

Has permission to participate in the following activity: Check box below.

Lego Engineering Workshop at Temple Beth Hillel

12326 Riverside Dr.
Valley Village, CA 91607

Date: Sunday, February 12, 2012

Time: 11:45 AM-2:15 PM

Cost: \$25.00 (payable to Temple Beth Hillel)

Forms and Payment Due by: Tuesday, January 31, 2012

Instructions: We will meet for lunch and the workshop at Temple Beth Hillel in the Feldman Horn Mercaz.

Health or Special Needs: Check one.

My student has no special health needs the staff should be aware of, and no medication is required.

My student has a special need, and instructions are attached.

Number of attached pages: _____

Other: _____

In the event of illness or injury, I do hereby consent to whatever x-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care and emergency transportation considered necessary in the best judgment of the attending physician, surgeon, or dentist and performed under the supervision of a member of the medical staff of the hospital or facility forcing medical or dental services.

I fully understand that participants are to abide by all rules and regulations governing conduct during the trip.

I agree to waive all claims against Temple Beth Hillel and hold its officers, employees, and agents harmless from any and all liability or claims which may arise out of or in connection with my child's participation in this activity. This waiver, however, shall not apply to any occurrences which may arise solely out of the negligence of Temple Beth Hillel its employee or agents.

Parent/Guardian Signature: _____ /_____/_____
Print Name Signature Date

Home Phone: (____) _____-_____ Cell Phone: (____) _____-_____

PLEASE COMPLETE AND SIGN THE REVERSE SIDE OF THIS FORM!!!

Student's Name: _____ Student's Date of Birth: ____/____/____

Medical Insurance Carrier: _____ Policy #: _____

If parent is unavailable in the event of illness or accident, please notify:

_____ *Name* _____ *Relationship to Child*

Home Phone: (____) ____-____ Cell Phone: (____) ____-____

Please READ and SIGN the following:

I hereby agree to indemnify, defend and hold harmless Temple Beth Hillel and its officers, employee, agents and volunteers, from and against any and all damages, loss, liability, charges, and expenses in any way arising out of my (or my children's) participation in the program for which I am registering. I give permission to Temple Beth Hillel to photograph me or my children participating in this program for which I am registering for use in future city publicity and I acknowledge that I will not receive any compensation for such use.

Parent/Guardian Signature: _____ *Print Name* _____ *Signature* ____/____/____ *Date*