

West Springfield

Park & Recreation Department

TRICK OR TREAT TRAIL

This Halloween, the West Springfield Park & Recreation Department is pleased to offer a Trick or Treat Trail walk for West Springfield Residents! Join us on Saturday, October 25th (Raindate: Sunday, October 26th) at the Morgan Road Pavilion (459 Morgan Rd., behind the Irish Cultural Center) for a Trick or Treat Event! Children are encouraged to come in their Halloween costume, walk the Bagg Brook Trail (¼ mile - about 20 minutes in length) with a parent/chaperone and stop at different stations along the way to collect Halloween treats!

Registrations begin online <u>Thursday, September 11, at 4:00 PM</u>. You <u>MUST PRE-REGISTER</u> (<u>no registrations will be taken at the event</u>) your child for **ONE SESSION ONLY**. *Parents/Chaperones DO NOT need to register for this event*. There are 80 slots in each session, so plan accordingly if you'd like to register and attend with a friend. Register early, as these spots are sure to fill! **Please note: this event is for West Springfield Residents ONLY**

Park in the designated area next to the Morgan Road Pavilion, check in with a Park & Recreation Staff Member, and you'll be ready to walk the trail!

| Activity # | Date: (SATURDAY) | Session Start Time | <u>Location</u> | <u>Fee</u> |
|------------|--------------------------------------|--------------------|--|----------------|
| 110000-1A | October 25, 2025 (Raindate: Oct. 26) | 1:00PM | Morgan Road Pavilion, Bagg Brook Trail | \$10 per child |
| 110000-1B | October 25, 2025 (Raindate: Oct. 26) | 1:45PM | Morgan Road Pavilion, Bagg Brook Trail | \$10 per child |
| 110000-1C | October 25, 2025 (Raindate: Oct. 26) | 2:30PM | Morgan Road Pavilion, Bagg Brook Trail | \$10 per child |
| 110000-1D | October 25, 2025 (Raindate: Oct. 26) | 3:15PM | Morgan Road Pavilion, Bagg Brook Trail | \$10 per child |
| 110000-1E | October 25, 2025 (Raindate: Oct. 26) | 4:00PM | Morgan Road Pavilion, Bagg Brook Trail | \$10 per child |

West Springfield Park & Recreation Trick or Treat Trail Registration Form

| Parent Nam | ne | | Primary Phone | Primary Phone # | | | | |
|-------------|----------------------------|---|----------------------------|-------------------------------------|-------|---------------|-----|--|
| Street Addr | ress | Secondary Pho | Secondary Phone # | | | | | |
| City | | State Zip | Is this a change | Is this a change in address? Yes No | | | | |
| E-mail addı | | | | | | | | |
| MEDICAL | CONCERNS: Special Instruct | ions and/or information that an instruc | etor needs to be aware of: | | | | | |
| Activity # | Last Name (Child's) | First Name (Child's) | Address/City | Gender | Grade | Birth Date | Fee | |
| | | | | | | | | |
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RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

In consideration of being permitted to participate in West Springfield Park and Recreation Department programs/activities (hereinafter the "Program") I, the undersigned, on behalf of the participant listed above (hereinafter "Participant"), and for myself, my heirs, personal and/or legal representatives, next of kin, and assigns (hereinafter collectively referred to as "I" or "ME"), hereby:

- 1. RELEASE, WAIVE, DISCHARGE and COVENANT NOT TO SUE the Town of West Springfield, its agents, servants, employees, officials, volunteers, contractors, representatives (hereinafter the "Town") from any and all liability, claims, demands, actions, suits, loss and causes of action whatsoever arising out of or related to any loss, damage, or injury, including, but not limited to, death, illness, injury and/or disease of any kind, and including but not limited to any death, illness, injury and/or disease in any way related to or arising out of the novel coronavirus (COVID-19), that may be sustained by the Participant and/or arising out of or related to the Participant's participation in the Program, regardless of whether they arise in tort, contract, strict liability, or other legal theory.
- 2. INDEMNIFY, SAVE and HOLD HARMLESS the Town from any and all liability, claims, demands, actions, suits, loss, and causes of action and any cost it may incur, including court costs and attorneys' fees, arising out of or related to the Participant's participant's participant's participant in the Program, regardless of whether they arise in tort, contract, strict liability, or other legal theory.
- 3. ACKNOWLEDGE that the Participant's participation in the Program may be dangerous and may involve the risk of serious injury and/or illness, including COVID-19, and/or death and CONSENT to the Participant's voluntary participation and ASSUME full responsibility for any risk of loss, death, illness, injury and/or disease which I and/or the Participant may sustain arising out of or related to the Program whether known or unknown and whether caused by the negligence of the Town or otherwise.
- 4. AGREE that this Release and Waiver of Liability and Indemnity Agreement shall be construed in accordance with the laws of the Commonwealth of Massachusetts and that, in the event any portion of this document is deemed unlawful or unenforceable, said portion shall be severable and the balance of the terms shall continue in full legal force and effect.
- 5. AGREE that I, the undersigned, am the parent or legal guardian of the Participant. I hereby execute this Release and Waiver of Liability and Indemnity Agreement on the Participant's behalf. I understand that by executing this agreement on behalf of the Participant, I am binding the Participant and ME to the terms of this Release and Waiver of Liability and Indemnity Agreement.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILTY AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS, INCLUDING MY RIGHTS AND THE RIGHTS OF THE PARTICIPANT BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Parent/Legal Guardian Signature Parent/Legal Guardian Printed Name Participant Printed Name Date

TO REGISTER FOR THE TRICK OR TREAT TRAIL:

ONLINE:

Online registration is the fastest way to register for the event. Please note that all slots are assigned on a first come, first served basis. Click here to reach our Online Registration Site

- Log in with your credentials. Contact the Park & Recreation Office (parkandrec@tows.org) in order to verify your username and password
 or to get help setting up an account.
- Choose "Trick or Treat Trail", pick the section you are interested in, add to cart, and check out.
- Continue to the payment screen. This will allow you to use a credit/debit card to pay.
- Approximately 1 week prior to the event, you will receive an email newsletter with more information.

IN-PERSON:

Another way to register is by bringing your paperwork and payment (cash/check ONLY) into the Town Hall during Office Hours (8:00AM to 4:30PM). A staff member will assist you. Please note that all slots are assigned on a first come, first served basis.

Complete a Trick or Treat Trail Registration Form

- Make checks payable to "Town of West Springfield"
- A Park & Recreation Staff Member will process your transaction and give you receipt.
- Approximately 1 week prior to the event, you will receive an email newsletter with more information.

DROP BOX:

Using the White Drop Box located on the median outside of the Municipal Office Building is the next best option for Registration. Please note that all slots are assigned on a first come, first served basis.

- Complete a Trick or Treat Trail Registration Form
- Make checks payable to "Town of West Springfield"
- Write "Park and Recreation Department" on the front of a blank envelope
- Place in the White Drop Box located outside of the Municipal Office Building at 26 Central St.
- Check your email! The Park & Recreation Office will email you your registration confirmation.
- Approximately 1 week prior to the event, you will receive an email newsletter with more information.

MAIL-IN:

Mail-in is the final option on how to register. Please note that all slots are assigned on a first come, first served basis..

- Complete a Trick or Treat Trail Registration Form
- Make checks payable to "Town of West Springfield"
- Mail to:

West Springfield Park & Recreation Department 26 Central Street - Suite 19

20 Central Street - Strite 19

West Springfield, MA 01089

- Check your email! The Park & Recreation Office will email you your registration confirmation.
- Approximately 1 week prior to the event, you will receive an email newsletter with more information.

