



# Wellesley Teen Center 2012/2013

The Wellesley Teen Center is run by parent volunteers. We need your help to continue the great tradition that is Teen Center.  
Please consider volunteering, becoming a board member or donating to the Teen Center.

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ I/We are available to volunteer time to support the Wellesley Teen Center by checking participants in at the door or by serving refreshments on an agreed scheduled date. A member of our staff will contact you to set up a convenient date.

\_\_\_\_\_ I/We would like to make a monetary donation to the Wellesley Teen Center.

\$ \_\_\_\_\_ Cash Check

Please remit to: Town of Wellesley, 90 Washington St. Wellesley, MA 02481

\_\_\_\_\_ I/We would like to participate on the Teen Center Board of Advisors. Please contact me/us.

Send to: Wellesley Teen Center  
90 Washington St.  
Wellesley, MA 02481

## Wellesley Teen Center Mandatory Permission Form

Name \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Parent's Names \_\_\_\_\_

School Attending \_\_\_\_\_ Grade \_\_\_\_\_

Please attach the one time activities fee of \$30 \_\_\_\_\_ Yes, I have attached the activities fee \_\_\_\_\_ No, I have already paid the activities fee

If a parent cannot be reached:

Emergency Contact: \_\_\_\_\_ Telephone \_\_\_\_\_

E-mail address \_\_\_\_\_

Important medical problems or allergies: \_\_\_\_\_

**MY CHILD AND I HAVE READ THE RULES AND REGULATIONS OF THE WELLESLEY TEEN CENTER AND AGREE TO ABIDE BY THE, INCLUDING OBSERVING THE WELLESLEY MIDDLE SCHOOL DRESS CODE.**

In addition, I give permission for Wellesley Recreation/Teen Center to use photographs that include my child in materials to promote the Teen Center (e.g. Internet, flyers).

\_\_\_\_\_  
Teen Signature

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date