

## **Bus trip Registration: Salem Massachusetts**



# A Day on your own in Salem, MA—Saturday October 15, 2022

Join us for an exciting trip to Salem, Massachusetts this October, just in time for Spooky Season! We provide the transportation, and you are free to explore the streets of Salem as you wish! Just make sure you meet us back at the bus station by 5:45pm for the bus ride home.

**Day:** Saturday

**Date:** October 15, 2022

**Time:** 7:00am- Tolland Commuter Parking Lot (Exit 68 off of I-84)

Arrival: Approximately 9:00am, Salem Train & Bus Station: 252 Bridge St, Salem, MA 01970

**Depart:** 6:00pm-Salem Train & Bus Station: 252 Bridge St, Salem, MA 01970

**Return:** Approximately 8:00 -8:30PM- Tolland Commuter Parking Lot

**Cost:** \$60 per person **Location:** Salem, MA

Register online at https://boltonrec.recdesk.com/

Join this wonderful trip put on by Ashford, Coventry, Bolton, Mansfield and Tolland.

#### **Registration Deadline: October 3, 2022**

COVID Guidelines are ever changing and we will continue following all recommended guidelines from the state, OEC, CDC, and the health district. These will be followed by everyone at ALL in person programs AND events!

\*\*\*Any programs and all facilities may close with or without notice depending on COVID infection rates and community transmission\*\*\*

For any questions or concerns please contact recreation director: Stephanie Crane Phone: (860)649-8066 X6109 email: scrane@boltonct.org

# BOLTTON DEPARTMENT

### **Passenger Information:**

	Name:	Cell Phone:			
ATION DEPARTMENT					
	Any health information or any special needs to know in case of emergency:				
Emergency contact:					
Name:		Relation:	Phone:		
Please fill out a new	form for each ind	ividual person traveling	! Thank you! ☺		
Payment Informatio	<b>n:</b> please make ch	necks payable to Bolton	Recreation Depai	tment	
To pay with credit ca	rds there is a 2.99	% fee charge; this fee co	mes directly from	the proce	essing company
and is not a fee of th	e recreation depa	rtment.			
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Expiration:	CVC Code:	Signature:			
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death. I give Bolton F	Recreation staff a	nd volunteers permissio	n to provide eme	rgency fir	st aid or to
obtain emergency m	edical treatment	for myself in the event t	that an injury occ	urs during	a program. In
consideration of part	ticipation in Bolto	n Recreation Departme	nt Programs, the	undersign	ed agrees to
their likeliness, may	be photographed	or videotaped and that	such image may	be publish	ned in an outlet
used to promote or p	oublicize the prog	rams. Once registered,	there is no refund	for the e	vent/program.
Signature		Printed name		Date	

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