

HALLOWEEN FUN

All classes are held at the Crystal Community Center, 4800 Douglas Drive N. Residents of Crystal, Golden Valley, New Hope and Robbinsdale are considered residents For more information call Crystal Recreation at 763-531-0052 or www.crystalmn.gov

HALLOWEEN CRAFT PARTY

(Activity 7463)

What's the best part about Halloween? The candy, of course! Youth ages 5-10 we'll create a spooky graveyard scene out of tons of "sweet" art supplies including some Halloween candy favorites like candy corn! Register October 4.



When: Saturday, October 12
Time: 12:30-2:00 pm
Location: Crystal Community Center
Fee: \$17 residents \$24 non-residents

CREEPY CUPCAKES

(Activity 7464)

Parents and youth ages 5 and up can learn to decorate creepy Halloween cupcakes together in this 90-minute class. We will make eerie eyeballs, mysterious mummies and spooky spider-webs. Participants need to bring 12 cupcakes and a container to bring your completed treats home in. Register by October 21.



When: Sunday, October 27
Time: 2:00-3:30 pm
Location: Crystal Community Center
Fee: \$19/pair residents \$26/pair non-residents

For more information call the Crystal Recreation Department at 763-531-0052 or register on-line at www.crystalconnect.org
 To find us on Facebook go to www.facebook.com/crystalrec

Participant Name	DOB	Activity	Activity No.	Time	Fee
TOTAL					

Home Phone _____ Work Phone _____ Other Phone _____ E-mail _____

Address _____ City _____ State _____ Zip _____

Please list any special needs or allergies _____

Visa/Mastercard Number _____ Expiration Date _____ Cardholder's signature _____

The undersigned understands that participation in this activity is completely voluntary and that the activity is being offered for the benefit of the participants named above. The undersigned agrees that the participants are participating in the activity at their own risk. I also agree that the City of Crystal, its agents and employees, will not be liable for any claims, injuries or damages of whatever nature incurred by the participants due to the negligence of the City, its agents or employees, arising out of or connected with this activity. On behalf of himself/herself and the participants, the undersigned expressly release the discharge of the City of Crystal, its agents and employees, from any such claims, injuries or damages.

Signature of Participants or Parent _____ Date _____

