



Kindermusik With Krishna

The Premier Music and Movement Program For Children
Birth Through Seven Years

Classes held at Milford Town Hall-To register contact
Krishna Johnson 672-1324 or Rec. Dept. 672-1067

Recommended by pediatricians worldwide to develop
Speech • social skills• motor skills• musical ability

Spring 5-week session begins May 13th
to June 10th

Summer 5-week session begins June
24th to July 29th

Newborn to 1.5 years-Hickory, Dickory,
Tickle and Bounce, Peekaboo, I love
you!

Fridays 9:00-9:45 \$150.00

1.5 to 3 years-Creatures in My
Backyard

Creatures at the Ocean

Fridays 10:00-11:00 \$150.00

3 to 5 years- Confetti Days
On the Road

Fridays 11:15-12:15 \$150.00

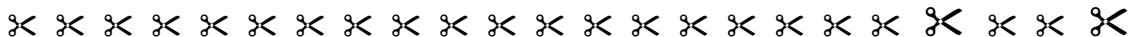
All prices include Home materials

Register on line at:

www.MakingMusik.com/Krishna

Classes also in Londonderry

About the instructor: Krishna Johnson has a bachelor's degree in Human Development and Family Studies. Her musical background includes choir, music lessons, formal Kindermusik training and enrichment seminars and a rich musical upbringing. She has taught Kindermusik in Nashua and Londonderry New Hampshire, Tucson AZ, and Orlando FL since October 1997. She now resides in Milford, NH with her husband and three young children.



Spring/Summer 2005 Registration Form-make checks payable to Milford Parks and Rec.
Classes Begin May13th, 2005 -Return with payment to: Recreation Dept. 1 Union Square Milford, NH 03055

Child's Name _____ Date of Birth _____

Name(s) of Parents _____ Address _____

City, State, Zip _____ Home Phone _____ Work Phone _____

Class Choice (s) _____ Spring _____ Summer _____ Both _____

I HEREBY GIVE MY PERMISSION for my son/daughter to participate in the Milford Parks & Recreation Dept program. I am aware of the hazards of the activity/sport and the risk of injury in these athletic and active programs. I assume all risks and hazards incidental to such participation, including transportation to and from activities, and I do hereby waive, release indemnify, and agree to hold harmless the said Town of Milford, its volunteers, staff and all sponsors for all liability for any and all loss or damage, and any claim arising out of injury to my son/daughter or property damage that might occur, whether caused by negligence of the Town, agents or employees, or during participation. **IN THE EVENT OF AN EMERGENCY, EVERY EFFORT WILL BE MADE TO CONTACT PARENT/GUARDIAN. PLEASE LIST ALL MEDICAL CONCERNS** or instructions the staff should know regarding your child's health on the back of this sheet (medications, allergies, behavior concerns, etc.) ☐ **Use back of form for details**

Parent/Guardian's Signature _____ Date _____