



OFFICER CHASE & K-9 MAXX WELCOME YOU TO

# MANSFIELD POLICE SAFETY TOWN 2026



## FIRST SESSION –

WEEK ONE: JUNE 8,9,10,11,12  
WEEK TWO: JUNE 15,16,17, 18  
(Closed June 19<sup>th</sup> to observe Juneteenth  
Graduation June 18<sup>th</sup>)

Sherman, Foundation Academy, Spanish Immersion, Madison, Stem

## SECOND SESSION –

WEEK ONE: June 22,23,24,25,26  
WEEK TWO: June 29,30 JULY 1,2, - **Graduation July  
2<sup>nd</sup>** (Closed July 3<sup>th</sup> to observe Independence Day)

St Peters, 1<sup>st</sup> Assembly Day Care, Mansfield Christian, RSSA, St. Mary's. Temple Christian

## THIRD SESSION -

WEEK ONE: JULY 6,7,8 9,10  
WEEK TWO: JULY -13,14,15,16,17

Mansfield YMCA Open to all...

Sessions are divided out by the Mansfield City elementary school your child will attend in the fall. It is for your child's benefit to socialize with children he/she will attend school with. Please refer to the information above to determine which session your child's school is assigned.

\*\*CHILDREN WHOSE SCHOOL IS NOT LISTED ABOVE WILL BE ASSIGNED TO A SESSION WITH OTHER CHILDREN IN THE SAME SCHOOL DISTRICT.

❖ [ALL CHILDREN MUST BE PRE-REGISTERED TO ATTEND SAFETY TOWN.](#)

❖ [REGISTRATION CUT-OFF IS ONE WEEK BEFORE THE START OF EACH SESSION.](#)

❖ [ALL CHILDREN ENTERING KINDERGARTEN IN THE FALL OF 2026 ARE INVITED TO ATTEND.](#)

All Safety Town sessions will take place at the OLD Brinkerhoff School, located at the corner of Arlington and 240 Euclid, from 9:00 a.m. to noon. Each session runs for 10 days (Monday through Friday over two weeks), excluding observed holidays on June 19th and July 4th.

For further information on the Safety Town program please contact:

**Ginger Antrican, Safety Town Director**  
**419.755.9428**

Between 9:30 a.m. and 6:00 p.m. Monday thru Thursday

30 N. Diamond Street, Mansfield, Ohio 44902  
[www.mansfieldpolicedepartment.com](http://www.mansfieldpolicedepartment.com)

# MANSFIELD POLICE SAFETY TOWN

## REGISTRATION FORM

SESSION # \_\_\_\_\_



Sessions are organized based on the elementary school your child will attend in the fall. To help your child build connections, they will be grouped with future classmates. However, attending the same school does not guarantee placement in the same classroom. Please refer to the parent information sheet to see which session corresponds to your child's school.

CHILD'S NAME:	AGE:	DATE OF BIRTH:	M / F
CHILD'S ADDRESS:	PHONE:	ZIP:	
SCHOOL TO ATTEND IN SEPT:			
FAMILY DOCTOR:	LOCATION:	PHONE:	
IN CASE OF AN EMERGENCY (IN PARENTS ABSENCE) NOTIFY:			PHONE:
MOTHERS NAME:	HOME PHONE:	WORK:	
FATHERS NAME:	HOME PHONE:	WORK:	

**LIST ANY MEDICAL PROBLEMS ON THE BACK OF THIS APPLICATION.**

### PLEASE READ CAREFULLY

#### RELEASE OF LIABILITY

I hereby grant permission by my signature on the Safety Town Registration Form for my son/daughter to participate in the above program activity sponsored by the Mansfield Division of Police.

In consideration of acceptance into the activities offered by the Mansfield Division of Police I/We, intending to be legally bound, do hereby for myself, my child, my heirs, executors, administrators, and assigns do hereby assume all risk of personal injury or death participating in such a program and activities while entering, being about, or leaving the property where such programs are conducted, and release agents, and servants of and from any and all actions, cause of actions, claims, demands, damages, cost in any way connected and will indemnify and save harmless said city, its officers, employees, agents, and servants from any such liability.

I/We further understand and have full knowledge that by signing the Safety Town Registration Form, I/We hereby give up all rights to recover any and all damages from the above entities and individuals that may be suffered as a result of such activities and programs.

I UNDERSTAND AND AGREE TO THE RELEASE OF LIABILITY FOR ALL PARTICIPANTS IN ALL SAFETY TOWN SESSIONS.

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

#### PHOTO RELEASE

I/We GIVE MY PERMISSION \_\_\_\_\_ DO NOT GIVE PERMISSION \_\_\_\_\_ to the Mansfield Division of Police to use digital photographs of my child in print and other media including the Mansfield Division of Police's website, exclusively for promotion of the Mansfield Division of Police programs.

I understand that these photos will never identify my child and that all information that identifies me, my child, my residence, or my child's school, is strictly confidential.

I understand that photos may be cropped or digitally retouched at the discretion of the Mansfield Division of Police.

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_