

PHS philadelphia flower show

flower Power!

Bus Trip March 8, 2019

Join your friends and other flower and gardening enthusiasts as we explore the annual Philadelphia Flower Show! It is sure to be a colorful event as the theme, "Flower Power," ties in the 50th Anniversary of Woodstock.

"The 190th PHS Philadelphia Flower Show will pay tribute to the enormous impact of flowers on our lives. From the first blooms of spring in your home garden to the expansive fields that fuel whole economies, flowers influence how we feel, think and act in small and global ways. Exhibits will take a holistic approach to the theme with sweeping landscapes and artful interpretations that inspire, convey emotions, examine fragrance and color and convey a universal language."

(For more information on the Flower Show visit: <https://theflowershow.com/>)

Registration fee includes motor coach transportation and flower show admission.

- **Date:** March 8, 2019
- **Depart:** Kent Island Park & Ride at 8:30 a.m.
(Next to Western Tire & Auto, Stevensville)
- **Depart:** Food Lion, Millington at 9:15 a.m.
- Return approximately 8:30 p.m.
- **Fee:** \$70

Program # 190006



**Registration deadline:
February 15, 2019**

(A minimum of 35 registered participants required by registration deadline.)

QUESTIONS? CALL 410 758 0835



Sponsored by:
Queen Anne's County
Parks & Recreation



Philadelphia Flower Show Flower Power

Fee: \$70

Program #190006

Registration Deadline: Fri., Feb. 15, 2019

Friday, March 8, 2019

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Return form to: 1945 4-H Park Road, Centreville, MD 21617; qacrecreation@qac.org; or 443-262-4673 (fax)

Participants Name: _____ M/F: ____ Age: ____ DOB: _____

(**PLEASE PRINT CLEARLY—ONE FORM PER PARTICIPANT**)

Philadelphia Flower Show; Friday, March 8, 2019 ----- **Check one departure location below:**

_____ **Depart Kent Island Park & Ride (next to Western Tire & Auto) 8:30 a.m.** (return approximately 8:30 p.m.)

_____ **Depart Food Lion, Millington 9:15 a.m.** (return approximately 8:00 p.m.)

Emergency Contact: (name/number) _____

***Medical Information** (medication, disabilities, etc.): _____

Payee (adult/parent/guardian):

Name: _____ Email: _____

Address: _____ Home Phone: _____

City: _____ Zip: _____ Cell Phone: _____

Method of Payment: (check one)

___ Cash

___ Check or money order (payable to QAC Recreation)

___ Mastercard/VISA Card #: _____

Exp: ____/____ CVV/CVC#: _____ Signature: _____

I recognize the risks of illness and injury in any exercise/physical fitness or education program and am participating in the Parks & Recreation program upon the express agreement and understanding that I am hereby waiving and releasing Parks & Recreation, its officers, directors, employees and agents from any and all claims, costs, liabilities, expense or judgment, including attorney's fees and court costs (herein, collectively "Claims") arising out of my participating in the aforesaid course/activity or any illness, injury or death resulting there from and hereby agree to indemnify and hold harmless the Parks & Recreation Department from and against all such Claims except Claims proximately caused by the gross negligence or willful misconduct of Parks & Recreation. ***Participants may at some time be photographed for publicity purposes.**

Participant or Parent/Guardian Signature



We need YOUR help! Do you have an idea or destination in mind for future trips? Give us a call, stop by our office, find us on Facebook or email svoorhees@qac.org with your ideas and suggested destinations. (All ideas and suggestions will be considered, however, some may not be logistically possible.)