

CUBBY'S CORNER

MAPLE AVENUE ELEMENTARY SCHOOL
WEEKLY NEWSLETTER
THURSDAY, APRIL 4, 2024

SUZANNE PYSZKA, PRINCIPAL



LISA JOHNSON, ASSISTANT PRINCIPAL

JILL RIOUX, DEAN OF STUDENTS

GNOME SWEET GNOME!

Last Friday was Gnome Day. Students from Ms. Sarette's third grade and Mrs. Burbee's first grade show off their Gnome fashion. Our Student Council Spirit Days are so much fun!



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SOLAR ECLIPSE



Our students will be learning about the upcoming solar eclipse by participating in several science and math activities. In addition, our wonderful PFT have purchased eclipse glasses for every student and every staff member! If your child will not be in school on Monday, April 8th because they are watching the eclipse in a different location, please let your child's teacher know so they can have their glasses on Friday, April 5th. On Monday the 8th, we will have designated viewing areas around the outside of the school for students to experience the solar eclipse!

ACROSTIC POETRY

Ms. Sarette's class created acrostic poems on the theme of spring using onomatopoeia, repetition, rhyme and alliteration!



PFT NEWS

Eclipse Glasses: The PFT has partnered with LUNT Solar Systems to purchase ISO Certified Solar Eclipse Glasses for our entire student body, faculty, and staff for the solar eclipse taking place on Monday, April 8!

PFT Monthly Meeting is on Thursday, April 11 at 7pm via Zoom at <https://us02web.zoom.us/j/850312906>
Next year's budget, updated bylaws, and Board elections will all be discussed.

Little Miss Dance, will be Saturday, April 13 from 6 to 9pm at the Hill Top Cafe at Mountain View Middle School. More Information at: <https://www.mapleavenuepft.com/little-miss-dance>

Volunteer for Little Miss Dance at <https://www.signupgenius.com/go/10C0E4EA8AF2CA5FAC16-48559273-little#/>

Family Night at Chucky Cheese! Friday, April 19. Mention Maple Avenue when you check in and 20% of the proceeds will come back to the PFT! See the attached flyer for coupons!

Boys Night Out: Information will be coming soon!

Spring Spirit Wear ordering is now open. Order your Goffstown and Maple Avenue gear at: <https://www.browngraphics.com/maple-ave-spring-spiritwear-.html>

SAVE THE DATE

- | | |
|--------------|--|
| 4/5-4/16/24 | State Testing in reading and math (Grade 3 and 4) |
| 4/5/24 | Yearbook Orders Due! http://www.treering.com |
| 4/8/24 | Solar Eclipse- PFT providing viewing glasses for students and staff |
| 4/13/24 | PFT Little Miss Dance at MVMS, 6-9 pm |
| 4/17/24 | Show Chorus performance at GHS (Grade 4) |
| 4/18/24 | End of Testing Party (Grade 3 and 4) teachers will share more information |
| 4/22-4/26/24 | April Vacation |

Maple Avenue Elementary

2023-2024

Online Yearbook Sale



**We are proud to announce the Maple Avenue Elementary School
2023-2024 online yearbook sale.**

Our yearbook will include:

- ✓ A yearbook filled with color that vibrantly captures school memories
- ✓ Sturdy softcover with a protective coating to preserve your keepsake, with an option to upgrade to a hardcover for an additional charge
- ✓ School name and year on the cover
- ✓ Two free pages for your family to personalize for your own child's yearbook

YEARBOOKS ON SALE NOW! ONLINE ORDERS ONLY


- Yearbook pricing:
 - Softcover is \$18.65
 - Hardcover is \$24.90
- All orders will be shipped to **Maple Avenue Elementary School**
- Order online at www.treering.com and enter the passcode **101444670442868**
- Deadline for all yearbook sales and personalizations is **April 5, 2024**

***Every family has 2 free pages to personalize for their child. All personalizations must be considered school appropriate. Maple Avenue Elementary School reserves the right to edit or remove any content at anytime.

After you submit your order at www.treering.com, you will be able to customize two pages with your own photos and messages. Each child will only receive their personalized pages in their own yearbook. All personalizations must be completed and submitted for review by **April 5th** to have it included in the yearbook. Unfortunately, no personalization will be accepted after this date.

In partnership with *Trees for the Future*,
TreeRing will plant a tree for every yearbook ordered.





You and an adult guest of your choosing
are invited to the

Little Miss

Luau Dance

Saturday, April 13, 2024

6 to 9 pm

**Mountain View Middle School
Hill Top Cafe**

\$32 per party

More Information and Registration at
www.mapleavenuepft.com/little-miss-dance

Registration closes April 6, 2024

MAES SPRING SPIRITWEAR

Deadline to order is Sunday, April 21 at Midnight



<https://www.browngraphix.com/maple-ave-spring-spiritwear.html>

CHUCK E. CHEESE® FUNdraising

Turning Fun into Funds™



**CHUCK E. CHEESE
DONATES
20%
ON THE SALE**

generated from this event
to your child's school.

Friends and family members are
encouraged to help support this event.

**Mention your school when ordering!
Bring this flyer to Chuck E. Cheese.**

EVENT INFORMATION

LOCATION: **CHUCK E. CHEESE®**

TIME: 11 am to 9 pm

SCHOOL: Maple Avenue

EVENT DATE: Friday, April 19

EVENT ADDRESS:

1525 South Willow Street

Manchester, NH

To find out more, check out **chuckecheese.com**

**120 PLAY
POINTS
FOR \$30**

FR Panel #8166

**CHUCK E.
CHEESE®**

EXPIRES 12/31/24

Limit one per check. Valid with coupon and only on night of Fundraising Event.
Only at participating locations. Play card or band activation not included.
Dine-in only. © 2023 CEC Ent. Conc. LP. All rights reserved.

\$29⁹⁹

**1 Large (1 Topping) Pizza
4 Drinks**

EXPIRES 12/31/24

Limit one per check. Valid with coupon and only on night of Fundraising
Event. Only at participating locations. Dine-in only.
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FR Panel #5996

**CHUCK E.
CHEESE®**

**DOWNLOAD THE
NEW APP
GET 500 FREE
E-TICKETS!**



EXPIRES 12/31/24

One time offer. Valid with first time registration.
See chuckecheese.com for more details.
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Sales include all food and merchandise purchased at the registers. Delivery & Carryout Orders placed directly at ChuckE Cheese.com now also apply towards your fundraiser. You must add the item "School or Organization Fundraiser" to your cart before check-out and order from the location noted at right.

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Special Olympics
Young Athletes

**WE ARE HOSTING A
SPRING TERM OF
YOUNG
ATHLETES**

Young Athletes is an innovative sports play program for children **with and without disabilities ages 2-7.**

Designed to provide opportunities for young children to be active, have fun, and learn foundational sports skills. The program supports physical, cognitive and social development.

SATURDAYS

4/13, 4/20, 4/27, 5/11, 5/25, 6/1, 6/8, 6/15

9:30 AM-10:30 AM

**GOFFSTOWN PARKS & REC
155 S. MAST ST.
GOFFSTOWN, NH**

**THE PROGRAM WILL BE LIMITED TO
15 CHILDREN MAXIMUM
THERE IS NO COST TO YOUR FAMILY
FOR PARTICIPATING**

**YOU MUST PRE-REGISTER BY COMPLETING THE ATTACHED APPLICATION
AND RETURN IT TO:**

**COACH KAELYN GAGNON
GYMKAEO320@GMAIL.COM
603.493.6198**

YOUNG ATHLETE APPLICATION



Local Program: _____

Are you new to Special Olympics or re-registering? New Re-Registering

YOUNG ATHLETE INFORMATION	
First Name:	Middle Name:
Last Name:	Preferred Name:
Date of Birth:	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Other Gender Identity
Has an Intellectual or Developmental Disability: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Race/Ethnicity (Optional): <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian American <input type="checkbox"/> Prefer not to answer <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> More than one Race <input type="checkbox"/> White or Caucasian <input type="checkbox"/> Hispanic or Latinx	
Language(s) Spoken in Young Athlete's Home (Optional): Check all that apply: <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other (please list):	
Shirt Size:	<input type="checkbox"/> Youth Small <input type="checkbox"/> Youth Medium <input type="checkbox"/> Youth Large
Requires Wheelchair Accessible Locations	<input type="checkbox"/> Yes <input type="checkbox"/> No
Language Needs:	<input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other (please list)
<input type="checkbox"/> Medical Conditions: (please list)	
<input type="checkbox"/> Special Diet: (please list)	
<input type="checkbox"/> Other Needs: (please list)	
PARENT / GUARDIAN INFORMATION	
First Name:	Last Name:
Relationship:	
Home Address:	City:
State:	Postal Code:
Phone: Phone	<input type="checkbox"/> Cell Phone <input type="checkbox"/> Work Phone <input type="checkbox"/> Home
E-mail:	
EMERGENCY CONTACT INFORMATION	
<input type="checkbox"/> Same as Guardian/Parent	Relationship:
First Name:	Last Name:
Phone: Phone	<input type="checkbox"/> Cell Phone <input type="checkbox"/> Work Phone <input type="checkbox"/> Home
E-mail:	

YOUNG ATHLETE RELEASE FORM



I am the Parent or Guardian of the Young Athletes participant named below and agree to the following:

- 1. Able to Participate.** The Young Athlete is physically able to take part in Special Olympics.
- 2. Likeness Release.** I give permission to Special Olympics, Inc., Special Olympics games organizing committees, and Special Olympics accredited Programs (collectively "Special Olympics") to use the Young Athlete's likeness, photo, video, name, voice, words, and biographical information to promote Special Olympics and raise funds for Special Olympics.
- 3. Risk of Concussion and Other Injury.** I know there is a risk of injury. I understand the risk of continuing to participate with or after a concussion or other injury. The Young Athlete may have to get medical care if there is a suspected concussion or other injury. The Young Athlete also may have to wait 7 days or more and get permission from a doctor before playing sports again.

Emergency Care. If a parent or guardian is unavailable to consent or make medical decisions in an emergency, I authorize Special Olympics to seek medical care for the Young Athlete, unless I mark one of these boxes:

- I have a religious or other objection to receiving medical treatment. (Not common.)
- I do not consent to blood transfusions. (Not common.)

(If either box is marked, an EMERGENCY MEDICAL CARE REFUSAL FORM must be completed. Visit www.sonh.org to access the form).

- 4. Health Programs.** If the Young Athlete takes part in a Special Olympics health program, I consent to health activities, exams, and treatment for the Young Athlete. This should not replace regular health care. I can say no to treatment or anything else any time for the Young Athlete.
- 5. Personal Information.** I understand that Special Olympics will be collecting the Young Athlete's personal information as part of participation, including name, image, address, telephone number, health information, and other personally identifying and health related information provided to Special Olympics ("personal information").
 - I agree and consent to Special Olympics:
 - using the personal information in order to: confirm eligibility and safe participation; run trainings and events; share competition results (including on the Web and in news media); provide health treatment if the Young Athlete participates in a health program; analyze data for the purposes of improving programming and identifying and responding to the needs of Special Olympics participants; perform computer operations, quality assurance, testing, and other related activities; and provide event-related services.
 - using the personal information for communications and marketing purposes, including direct digital marketing through email, text message, and social media.
 - sharing personal information with (i) researchers, such as universities and public health agencies, that are studying intellectual disabilities and the impact of Special Olympics activities, (ii) medical professionals in an emergency, and (iii) government authorities for the purpose of assisting with any visas required for international travel to Special Olympics events and for any other purpose necessary to protect public safety, respond to government requests, and report information as required by law.
 - I have the right to ask to see the personal information or to be informed about the personal information that is processed. I have the right to ask to correct and delete the personal information, and to restrict the processing of personal information if it is inconsistent with this consent.
 - Privacy Policy.** Personal information may be used and shared consistent with this form and as further explained in the Special Olympics New Hampshire privacy policy at <https://www.sonh.org/privacy-policy/>.

Young Athlete Name:	
PARENT/GUARDIAN SIGNATURE	
I am a parent or guardian of the Young Athlete. I have read and understand this form. By signing, I agree to this form on my own behalf and on behalf of the Young Athlete.	
Parent/Guardian Signature:	Date:
Printed Name:	Relationship:

YOUNG ATHLETE LIKENESS RELEASE FOR SPONSORS (OPTIONAL)



Special Olympics relies on sponsors and partners to help support our mission. We often use photos, videos and stories of our athletes to show the impact of support by companies that sponsor Special Olympics. If you wish to allow the Young Athlete’s likeness to be used in this way, please read and sign below.

I agree to the following:

- I give permission to Special Olympics, Inc., Special Olympics Games Organizing Committees, and Special Olympics Accredited Programs (collectively, “Special Olympics”) and their sponsors and partners to use the Young Athlete’s likeness, photo, video, name, voice, and words (“Likeness”) to acknowledge the sponsors’ and partners’ support for Special Olympics.
- Special Olympics and its sponsors and partners will not use the Young Athlete’s Likeness to endorse commercial products or services.
- I understand neither the Young Athlete nor I will not be compensated for the use of the Young Athlete’s Likeness.

Young Athlete Name:	
PARENT/GUARDIAN SIGNATURE	
I am a parent or guardian of the Young Athlete. I have read and understand this form. By signing, I agree to this form on my own behalf and on behalf of the Young Athlete.	
Parent/Guardian Signature:	Date:
Printed Name:	Relationship:



REGISTRATION IS NOW OPEN FOR OUR 2024 SPRING SEASON!

Tee Ball ages 4-6 \$125 per player

Farm (coach and player pitch) ages 6-8 \$125 per player

Minors ages 8-10 \$160 per player

Majors ages 10-12 \$160 per player

Intermediate age 13 \$170 per player

Juniors age 14 \$170 per player

Seniors ages 14-16 \$170 per player

Challenger (adaptive league) ages 4 and up- no age limit \$50 per player

Go to www.GoffstownJrBaseball.com to register!

2024 T-Mobile Call Up Grant to cover registration fees available for a limited time.

www.littleleague.org/call-up-grant-program

Player pitch at any level - registration deadline is 2-29-24.

Player pitch evaluation date will be at MVMS on Sunday AM 3-3-24.

All other divisions close end of March.

Late registrations could be subject to unavailability or a late fee.

Please email GJBBoard@GoffstownJrBaseball.com with any questions.

See you on the field!



Our primary goal is for kids to have fun learning to play baseball, while also teaching the fundamentals of life, fair play, and good sportsmanship.



REGISTER HERE



Fall

2024

Registration



EARLY BIRD

\$100 W/CAMP* - SHOES AND BLOOMERS INCLUDED

\$185- SHOES AND BLOOMERS INCLUDED

Register by 5/15/24

Registered after 5/15/24

\$140 W/CAMP* - SHOES AND BLOOMERS INCLUDED

\$225- SHOES AND BLOOMERS INCLUDED

- Tiny Mites- 5-7
 - D8 - 7-8
 - D10 - 9-10
 - D12 - 11-12
 - D14 - 13-14
 - D16 - 15-16

*w/camp=UCA overnight camp payment \$285 or commuter \$220



Saturday, April 13th from 10 - 4

Saint Anselm College

120+ Vendors and Crafters

Offering product demonstrations, free samples, discount coupons, and homemade goods



Dedicated Kids Zone

* Additional charges will apply

Enjoy bounce houses, slides, glitter tattoos, face painting, games and more

Food Court

Meals, snacks, and drinks

Prizes

Door prizes, raffles, and a silent auction

And a visit from Fungo and a WZID Morning Host



Scan the QR code for discounted ticket sales or vendor information


www.goffstowncitizenscommittee.ticketspice.com



Brought to you by the Goffstown Citizens' Committee.

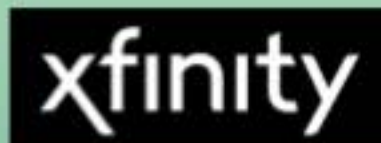


Proudly supporting Goffstown Scouts BSA for over 100 years.

 Goffstown Citizens Committee



Sponsored by





***You're
Invited!***



AGOGGE

WRESTLING CLUB

FREE

Introduction to Wrestling Class

for brand new wrestlers aged 4 to 18

Monday, April 22nd 5-6pm

or

Wednesday, April 24th 5-6pm

Register Today

www.agogewrestlingclub.com

