

Creatively Yours

CALLING ALL TEENS
LIVING WITH PEDIATRIC MS
AND THEIR PARENTS



**Come meet
other young people living with MS**

- 12 p.m. Networking Lunch for Families
1 p.m. -Teen Workshop addressing school accommodations, student rights, and self-advocacy
 - Parent discussion group
2- 4 p.m. Canvas Painting
 Go home with your very own work of ART!

Saturday, February 28, 2015

12 - 4 p.m.

**The Painting Lounge
40 West 38th Street
2nd floor,
between 5th and 6th Avenues
New York, NY 10018**

This collaborative program, open to teens ages 13-19, will provide an opportunity to meet other families living with pediatric MS, participate in self-advocacy training, empowerment activities, and explore your creativity through a canvas painting activity.



Stony Brook Children's
Lourie Center for Pediatric MS



National Multiple Sclerosis Society
New York City –
Southern New York Chapter

To register, call
1-800-344-4867, Option 1 or
Email: moyra.rondon@nmss.org
or register online at
www.MSnyc.org

RSVP by February 25, 2015



Waiver and Release

I agree to hold harmless the NYC-Southern NY Chapter of the National MS Society, corporate sponsors, cooperating organizations and all other parties connected with this event on 2/28/2015 from any liability as a result of my or my child's/children's participation. I will permit emergency treatment in the event of injury or illness for myself or my child/children while participating in the event. The NYC-Southern NY Chapter of the National MS Society reserves the right to dismiss any person who causes a disturbance. I certify that I have read this waiver and release and understand its intent. I give permission to the NYC-Southern NY Chapter of the National MS Society to use the names of our family and any photo taken of me and/or my family during the event in any promotional materials or publications on the chapter's website.

Print Name of Parent or Guardian

Date

Signature of Parent or Guardian

Phone number

Street Address

City, State, Zip

Name of child/teen with MS

DOB

Name of additional child/teen

DOB

Name of additional child/teen

DOB

Emergency Contact Name

Emergency Phone #