



# Adult Program Trip Wilson and Rocky Mount, NC Thursday, October 27, 2016

**Are you a fan of history and whimsical things?** Then join us on this interesting trip to Wilson and Rocky Mount, NC. We will be leaving from Anne Gordon Active Adult Center at Millbrook Exchange Park (1901 Spring Forest Road) at 9:00am.

Our trip begins in Rocky Mount with a guided tour of historic Stonewall Manor, built circa 1830 by Bennett Bunn, a well established and prosperous planter. Stonewall provides unique insight into the Antebellum plantation lifestyle of the South. Our tour guide is the great-great grandson of Bennett Bunn. This building is not handicap accessible and does not have railings on the front steps. Following our tour we head to Wilson for lunch (on your own) at the Something Different Café, a “Country Club” atmosphere without the “Country Club Price”. Next, imagine a place where vibrant color, dynamic motion, and rhythmic sound dazzle the senses. Our next stop, the Vollis Simpson Whirligig Park is a public park and outdoor museum with one of a kind wind-powered sculptures of world-renowned artist and engineer Vollis Simpson. The group will visit the Whirligig Park and the Wilson Visitors Center to have a guided tour of the Conservation Headquarters, where all the restorations and repairs are done to the sculptures.

We always encourage participants to wear comfortable walking shoes and clothing. The group will arrive back at the Anne Gordon Center in Raleigh at approximately 4:15pm.

#### **Price:**

\$48.00 City of Raleigh Resident

\$63.00 Non-City of Raleigh Resident

#### **Price Includes:**

Transportation via charter motorcoach to Wilson Visitors Center, Vollis Simpson Whirligig Park and guided tour of Stonewall Manor and Conservation Headquarters. Lunch at the Something Different Café is on your own (\$6.00-\$10.00).

#### **Patron Expectations:**

This trip has a moderate volume of walking expected, including some steps, and uneven paths with loose bricks and gravel. The Stonewall Manor does not have handrails for the steps nor a wheelchair ramp. Patrons must be able to keep to the scheduled timeline of the trip. Please remember there is no one-on-one assistance provided by the escorts.

#### **Cancellation Policy:**

Cancellations must be made in writing at least 14 days prior to trip departure date to receive a refund. Full or partial refunds will be made only if a replacement can be found, and are subject to non-refundable expenses incurred by the Department. If the Department cancels a trip, a full refund will be given.

#### **To register return the bottom portion of the back page with payment to:**

Anne Gordon Center for Active Adults  
1901 Spring Forest Road Raleigh, NC 27615

Walk-in registrations are taken at any of our Active Adult Centers.

Credit Card payments can be made by phone, at any PRCR facility or by RecLink



**RALEIGH** Parks,  
Recreation and  
Cultural Resources  
[parks.raleighnc.gov](http://parks.raleighnc.gov)

Anne Gordon Center 919-996-4720

Five Point Center 919-996-4730

Walnut Terrace Center 919-996-6160



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\$48.00 City of Raleigh Resident                      \$63.00 Non-City of Raleigh Resident

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**Make checks payable to:** City of Raleigh

**To Register: Complete the form below and return with full payment to:**

Anne Gordon Center for Active Adults

*Adult Program*

1901 Spring Forest Road Raleigh, NC 27615

Walk-in registration are taken at any of our Active Adult Centers.

Credit Card payments can be made by phone, at any PRCR facility or by RecLink

**For Additional Information Contact:** Adult Program Staff at 919-996-4730 or 919-996-4720

**Keep top portion for your records**

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**Wilson Thursday, October 27, 2016**

I understand that participating in the recreational program selected involves risk of injury or illness. These risks include, but are not limited to, inclement weather, accidents while traveling, food related illness, equipment problems or failures, contact with and actions of other participants, spectators, and volunteers, slips/trips/falls, and musculoskeletal injuries, among others. I choose for myself or for my child to participate in the selected programs despite the risks.

By signing the Program Registration form, I acknowledge all risks of injury, illness, death, and property damage, and affirm that I have assumed all responsibility of injury, illness, or death in any way connected with participation in the program. I also agree for myself and for any child participant to follow all rules and procedures of the program and to follow the reasonable instructions of the teachers and supervisors of the program.

In return for the opportunity to participate in this program, I agree for myself and for my heirs, assigns, executors, and administrators to release, waive, and discharge any legal rights I may have to seek payment or relief of any kind from the City, its employees or its agents for injury, illness, or death resulting from this program. If I am registering a child for a program, I agree that I am a parent, legal guardian, or am otherwise responsible for the child whose application I am submitting and that I release, waive, and discharge any legal rights that I may assert on behalf of the child participation in the program. I also agree not to sue the City, its employees, or its agents and agree to indemnify the City for all claims, damages, losses, or expenses, including attorney's fees, if a suit is filed concerning an injury, illness, or death to me or to my child resulting from participation in the program

**Signature of participant**

**Date signed**

**I understand that there is no one-on-one assistance provided by Raleigh PRCR Adult Program Staff**      **Initial**

Name of Participant \_\_\_\_\_ Name of Participant \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Primary Phone \_\_\_\_\_ Secondary Phone \_\_\_\_\_

**NON-DISCRIMINATION POLICY:** The City of Raleigh does not discriminate on the basis of race, color, national origin, sex, religion, sexual orientation or disability in employment opportunities or the provision of services, programs or activities. A participant alleging discrimination on the basis of the aforementioned areas may file a complaint with either the Director of Raleigh Parks and Recreation Department or the Office of Equal Employment, US Dept. of the Interior, Washington, DC, 20240. The Raleigh Parks and Recreation Department will attempt to provide reasonable accommodations for program participants when the need or accommodation is requested in advance. To ensure a medically safe and appropriately planned program, please list (optional) any special needs or precautions which may require program accommodations for participation (i.e. visual or hearing impairment, mental or physical disability, heart condition, history of seizures, allergies, communicable diseases, diabetes, hemophilia, asthma, etc.):

Food Concerns

Office use: \_\_\_\_\_  
Staff Initials                      date