

CAROUSEL HOUSE PROGRAMS PRESENTS OUR

Spring Dance

FOR INTELLECTUALLY AND PHYSICALLY DISABLED
PERSONS AGED 16 AND OVER

MENU → REGULAR: TURKEY HOAGIE SOFT: YOGURT

DATE: FRIDAY MAY 8TH

TIME: 6PM - 9PM

LOCATION:
GUSTINE RECREATION CENTER
4868 RIDGE AVE
PHILADELPHIA, PA 19128

TICKETS: \$10.00

TICKETS CAN BE PURCHASED AT:
GUSTINE RECREATION CENTER
4868 RIDGE AVE PHILA, PA 19129

TICKETS AND PRE-REGISTRATION REQUIRED (INCLUDING STAFF)
NO TICKETS WILL BE SOLD AT THE DOOR
NO REFUNDS

TICKETS LIMITED, REGISTER NOW!

FOR FURTHER INFORMATION CALL:
215-685-0160

OR EMAIL: CAROUSEL.HOUSE@PHILA.GOV

PLEASE COMPLETE FORM ON BACK AND RETURN WITH PAYMENT

The Carousel House Spring Dance will take place on Friday, May 8th, 2026, at Gustine Recreation Center. All intellectually and physically disabled persons aged 16 and over are invited!

Everyone must pre-register AND have a ticket, staff included. The price for the dance is \$10 per person. There is a 150-person limit for the dance. Tickets will be sold at:

**Gustine Recreation Center
4868 Ridge Ave Philadelphia, PA 19129
Monday through Friday 9:00am - 4:30pm**

Please make checks or money orders payable to “**City of Philadelphia.**”
Credit and debit cards are NOT accepted.

The following guidelines are provided to assist your group in planning a safe and pleasurable evening:

1. Loading and unloading passengers should be in front of the main door.
2. A caregiver should accompany participants needing assistance during toileting, eating, and dancing.
3. NO SMOKING OR VAPING ALLOWED INSIDE OR OUTSIDE THE FACILITY

If you have any questions, call Carousel House at 215-685-0160

**PLEASE SCHEDULE YOUR PICKUP FOR 8:30PM
GUSTINE RECREATION CENTER CLOSSES AT 9:00PM**

Tickets are non-refundable. No tickets will be sold at the door. You must have a ticket to enter. All individual group homes must have their tickets to enter the dance. If one person buys tickets for different group sites, please make sure each group home is listed on the registration form with the number of guests attending. Pre-register early and reserve your spot!

NAME/GROUP HOME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ PHONE: _____

AGENCY NAME: _____

AGENCY ADDRESS: _____

CONTACT PERSON: _____ PHONE: _____

EMAIL ADDRESS: _____

MEAL CHOICE: REGULAR: SOFT:

DO YOU REQUIRE A RECEIPT: INDIVIDUAL: GROUP:

ARE YOU CURRENTLY ON OUR MAILING LIST? YES: NO:

**OFFICIAL USE
ONLY**
(DO NOT WRITE IN THIS
SPACE)

AMOUNT PAID

TICKET NUMBERS

RECEIPT GIVEN

STAFF INITIALS

DATE RECEIVED

SPRING DANCE 2026