

# 2019 BOYS GYM PROGRAM SCHEDULE



## Parent Information



**LOCATION:** Kakiat Elementary School Gymnasium

**TIMES:**

<b>5th Grade</b>	Wednesday Nights	<b>7 - 8:15pm</b>
<b>6th Grade</b>	Monday Nights	<b>7 - 8:15pm</b>
<b>7th Grade</b>	Wednesday Nights	<b>8:15-9:30pm</b>
<b>8th Grade</b>	Monday Nights	<b>8:15-9:30pm</b>

**PROGRAM DATES: Mondays:** 1/7, 1/14, 1/28, 2/4, 2/11, 2/25, 3/4, 3/11, 3/18, 3/25



**Wednesdays:** 1/2, 1/9, 1/16, 1/23, 1/30, 2/6, 2/13, 2/27, 3/6, 3/13

**FEE:** \$40 per child—Includes team shirt  
Pre-registration required-no on-site registration will be taken!

**SNEAKERS ARE REQUIRED BY ALL PARTICIPANTS!**

**Closings for Inclement Weather will follow the East Ramapo School District Schedule.**

You may call 357-6100 before 5pm for updated information.

**Constant Contact:** Fill out your email address on the registration form. You will be contacted by the Parks Department regarding cancellations.

**PARENTS:** Please be prompt in picking up children. Additional fees will be charged for late pick-ups.

**PLEASE BE ADVISED:** Participants whose behavior is disruptive to the program will be asked to leave. If incidents persist, the child may be removed from the program permanently. **THERE WILL BE NO REFUNDS FOR CHILDREN DISMISSED FROM PROGRAM.**



## Boys Basketball Program 2019 Registration Form



*Please print legibly in ink and fill form out completely.*

### Participant's Information:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

School: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Full Address: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Email Address:** \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**REGISTER NOW...DEADLINE TO REGISTER IS FRIDAY, DECEMBER 28, 2018  
YOU MUST PRE-REGISTER—IF REGISTRATION IS LOW PROGRAM MAY BE CANCELLED**

**Mail completed form with a check made to Town of Ramapo:**

**Town of Ramapo Parks and Recreation  
3 Palisades Credit Union Park Drove  
Pomona, NY 10970**

**or**

**Register in person - payable by check, cash or credit card**

*I understand the Discipline/Refund Policy and that the Town of Ramapo does not offer accident insurance and that my personal insurance bears primary responsibility in case of an accident. The Town is not responsible for any valuables brought to the program.*

\_\_\_\_\_  
**Parent/Guardian Signature (Required)**

\_\_\_\_\_  
**Date**

