

2017 INTRO TO PICKLEBALL

Name: _____ Phone: _____

Address: _____ City/Zip: _____

Email: _____

Seniors (Retired Adults) - 8:30 AM – 10:00 AM _____

Youth Ages 14 to 18 - 10:00 AM – 11:30 AM _____

FIRST SESSION: Begins June 12 Mondays/Wednesdays _____
- June 28

SECOND SESSION: Begins July 10 Mondays/Wednesdays _____
- July 26

THIRD SESSION: Begins August 7 Mondays/Wednesdays _____
- August 23

FEE \$35 (Three week sessions)

Adult (18+) – 10 – 11:30 AM - Classes held on Saturdays for 3 weeks

FIRST SESSION: Begins June 17 _____

SECOND SESSION: Begins July 15 _____

THIRD SESSION: Begins August 12 _____

FEE \$25

ALL CLASSES HELD AT Northshire Park 3889 Nez Perce Rd.

I, the registrant or the parent/guardian of the registrant, a minor, agree that we will abide by the rules of the Cd'A Rec Dept., its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with the above activities, I hereby release, discharge, and/or otherwise indemnify the Cd'A Rec Dept., Behavioral Sports, its affiliated organizations and sponsors, their employees and associates personnel, against any claim by or on behalf of the registrant as a result of the registrant's participation in the program.

CONSENT FOR MEDICAL TREATMENT (MINOR): As the parent of the above named minor, I hereby give my Consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Dentistry. This care may Be given under whatever conditions are necessary to preserve, the life, limb, or wellbeing of my dependent.

SIGNATURE : _____ Date: _____

BRING YOUR OWN PADDLE, 3 PICKLEBALLS, AND A WATER BOTTLE. PLEASE WEAR ATHLETIC SHOES AND PROPER ATTIRE. LIGHTER WEIGHT PICKLEBALL PADDLES ARE RECOMMENDED FOR CHILDREN:
