

Town of Sudbury Park and Recreation

Presents

Skyhawks Sports Programs

For General Information call:
(978) 443-1092



For more information, course descriptions and what to bring visit www.skyhawks.com

Baseball

6/23 - 6/27	9:00am - 3:00pm	ages 6-14	\$145	Lower Featherland Park - Baseball Fields
7/14 - 7/18	9:00am - 3:00pm	ages 6-14	\$145	Lower Featherland Park - Baseball Fields
8/11 - 8/15	9:00am - 3:00pm	ages 6-14	\$145	Lower Featherland Park - Baseball Fields

Basketball

7/7 - 7/11	9:00am - 3:00pm	ages 6-14	\$145	Lincoln-Sudbury Regional H.S.
7/21 - 7/25	9:00am - 3:00pm	ages 6-14	\$145	Lincoln-Sudbury Regional H.S.
7/28 - 8/1	9:00am - 3:00pm	ages 6-14	\$145	Lincoln-Sudbury Regional H.S.

Mini-Hawk (Soccer, Baseball & Basketball)

6/16 - 6/20	9:00am - 12:00pm	ages 4-6	\$113	Haskell Recreation Area
6/23 - 6/27	9:00am - 12:00pm	ages 4-6	\$113	Haskell Recreation Area
6/30 - 7/3 <small>*no camp July 4th</small>	9:00am - 12:00pm	ages 4-6	\$93	Haskell Recreation Area
7/14 - 7/18	9:00am - 12:00pm	ages 4-6	\$113	Noyes School Field (Rear of Building)
7/21 - 7/25	9:00am - 12:00pm	ages 4-6	\$113	Noyes School Field (Rear of Building)
7/28 - 8/1	9:00am - 12:00pm	ages 4-6	\$113	Noyes School Field (Rear of Building)
8/4 - 8/8	9:00am - 12:00pm	ages 4-6	\$113	Noyes School Field (Rear of Building)
8/18 - 8/22	9:00am - 12:00pm	ages 4-6	\$113	Noyes School Field (Rear of Building)

Mighty-Hawk (Soccer, Baseball & Basketball)

6/30 - 7/3 <small>*no camp July 4th</small>	9:00am - 12:00pm	ages 6-8	\$93	Haskell Recreation Area
7/21 - 7/25	9:00am - 12:00pm	ages 6-8	\$113	Noyes School Field (Rear of Building)
7/28 - 8/1	9:00am - 12:00pm	ages 6-8	\$113	Noyes School Field (Rear of Building)
8/18 - 8/22	9:00am - 12:00pm	ages 6-8	\$113	Noyes School Field (Rear of Building)

S.N.A.G. Golf

7/7 - 7/11	9:00am - 12:00pm	ages 5-8	\$113	Haskell Recreation Area
8/4 - 8/8	9:00am - 12:00pm	ages 5-8	\$113	Haskell Recreation Area

Flag Football

8/11 - 8/15	9:00am - 12:00pm	ages 6-11	\$113	Haskell Recreation Area
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Tennis (Friday will be used for a rain back-up)

6/23 - 6/26	9:00am - 12:00pm	ages 6-8	\$93	Upper Featherland Park - Tennis Courts
7/14 - 7/17	9:00am - 12:00pm	ages 8-11	\$93	Upper Featherland Park - Tennis Courts
7/28 - 7/31	9:00am - 12:00pm	ages 8-11	\$93	Upper Featherland Park - Tennis Courts
8/4 - 8/7	9:00am - 12:00pm	ages 8-11	\$93	Upper Featherland Park - Tennis Courts

Volleyball

6/23 - 6/27	9:00am - 12:00pm	ages 10-15	\$113	Fairbank Community Center (Volleyball Cts)
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Frisbee

7/14 - 7/18	9:00am - 12:00pm	ages 10-14	\$113	Haskell Recreation Area
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Cheerleading

8/11 - 8/15	9:00am - 12:00pm	ages 6-10	\$113	Haskell Recreation Area
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PLEASE NOTE: EACH PARTICIPANT MUST PROVIDE A RECORD OF THEIR MOST RECENT PHYSICAL EXAM AND IMMUNIZATIONS DATED WITHIN THE PAST 24 MONTHS. PLEASE BRING ALL FORMS THE FIRST DAY OF EACH NEW CAMP/CLINIC WEEK FOR ALL PROGRAMS. PLEASE HAND IN FORMS TO THE CAMP DIRECTOR THE FIRST DAY OF THE PROGRAM.



2008 Summer Registration

Don't Miss Out! Sign Up NOW! Programs Fill Quickly

Participant Last Name _____
Participant First Name _____ BirthDate ____ - ____ - ____ Age ____ Gender: M / F
Parent Last Name _____ **Parent** First Name _____
Email _____
Mailing Address _____
City _____ State _____ Zip _____
Home Phone (____) ____ - ____ Work Phone (____) ____ - ____ Ask For _____
Emergency Contact (other than parent) _____ Phone (____) ____ - ____

PLEASE LIST THE PROGRAM(S) YOUR CHILD WILL ATTEND. Photocopy for additional children.

Sport	Date	Location	Fee
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
			Total \$ _____

Financially based scholarships are available. Please contact Sudbury Park and Recreation for scholarship forms.

Payment: _____ Check included, or Charge my: <input type="checkbox"/> Visa <input type="checkbox"/> M/C	Security Code _____
Card Number _____	Exp. Date ____ / ____
Signature _____	Name on card _____

Parents, please read and sign the Medical Consent and Release of Liability below to complete registration.

PARENT/GUARDIAN MUST READ AND SIGN IF PARTICIPANT IS UNDER AGE 18: "Please accept the above persons for this participation. I am aware of the risk inherent in this activity, and I hereby release the sponsors, Town of Sudbury, its employees, its agents, and its officers from responsibility for any and all associated losses, claim of loss, injury or damage resulting from participation in this activity. I have determined the nature and extent of the planned activities and feel that this participant is of sufficient age, ability, and discretion to participate. I agree that this participation will be at the discretion of the Park and Recreation Department. If any participant becomes a DISCIPLINE PROBLEM, HE OR SHE WILL BE EXPELLED FROM THE PROGRAMS WITHOUT REFUND OF THE PROGRAM FEE. Permission is hereby given for treatment of this participant by a medical doctor in the event of injury or illness during participation. Unless noted on this form, participant has no allergies or other problems which will interfere with normal participation. We do not discriminate on the basis of race, religion, color, sex, marital status, national origin or persons with disabilities. For cancellation or bad weather, please call Sudbury Park and Recreation Department at (978) 639-3233." Does Participant have any special medical needs?

Parent/Guardian Signature: _____ Date: ____ / ____ / ____

I, the undersigned parent/guardian of the individual named above, a minor, do hereby agree to allow the individual named herein to participate in the aforementioned activity and authorize the program directors and/or instructors as Agents for the undersigned to consent to Medical, Surgical and/or Dental Examination, in addition to any and all other Treatments that may be deemed necessary by medical personnel. It is understood that this activity involves an element of risk and a danger of accidents and knowing those risks I hereby assume those risks. In addition, I understand that by signing this agreement, I hereby release and discharge Skyhawks and Town of Sudbury Park and Recreation from any and all liability resulting in injury associated with participant's participation in this activity. I agree that pictures taken during program hours may be used for future promotional purposes. In the absence of a parent/guardian's signature below, payment of fees and participation in the program shall constitute acceptance of the conditions set forth in the release. Skyhawks will not provide health and/or accident insurance for program participants. As the undersigned parent/guardian I understand that no confirmations will be mailed and no refunds will be given.

Signature _____ Print Name _____ Date _____

Mail registration form and fee to: Town of Sudbury Park and Recreation
40 Fairbank Rd
Sudbury, MA 01776

Online registration: www.recreation.sudbury.ma.us

Walk-in registration: 40 Fairbank Road, Sudbury, MA 01776

Make checks payable to: Town of Sudbury

For more information please call: Town of Sudbury Park and Recreation: (978) 443-1092 or Skyhawks: (800) 804-3509

105 CMR 430.000 - These camps must comply with regulations of the Massachusetts Department of Public Health and be licensed by the local (Sudbury) Board of Health. Skyhawks' first concern is the safety of the children who participate in our programs. Copies of background checks, health care and discipline policies as well as procedures for filing grievances are available upon request.

PLEASE NOTE: EACH PARTICIPANT MUST PROVIDE A RECORD OF THEIR MOST RECENT PHYSICAL EXAM AND IMMUNIZATIONS DATED WITHIN THE PAST 24 MONTHS. PLEASE BRING ALL FORMS THE FIRST DAY OF EACH NEW CAMP/CLINIC WEEK FOR ALL PROGRAMS. PLEASE HAND IN FORMS TO THE CAMP DIRECTOR THE FIRST DAY OF THE PROGRAM.