PELHAM PARKS AND RECREATION

Mail to 6 Village Green, Pelham, NH 03076; Phone 635-2721; Fax 508-3094; Email Recreation@pelhamweb.com

GIRLS BASKETBALL CAMP 2016

Open to girls ages 7 - 13 for the week of June 27, 2016 - 9 am to noon, Mon-Fri

Participant Release Form

Participant Name	Age DOB:
Address	Phone:
Father's Name	Cell Phone
Mother's Name	Cell Phone

This is a recreation level basketball program consisting of basketball instruction and play involving a high level of physical activity. The program will take place Monday thru Friday the week of June 27, 2016 in Dennis Lyons Memorial Park. Parents are expected to arrange for transportation to and from the program, as needed.

Basketball poses a variety of risks to the children participating as a result of contact with the ball, other players, the ground and by the strenuous level of activity. These risks include but are not limited to bumps, bruises, cuts, abrasions, broken bones, concussions, heart attacks and even death. Because of the inherent risks and extensive physical activity involved in the game of basketball, we advise that all children participating be in good physical condition. Any limitations regarding their physical capabilities should be made known to the Parks and Recreation Department.

Participants must wear comfortable clothing and nonskid sneakers during participation in the Pelham Parks and Recreation basketball program. Other optional items are kneepads, mouth guards, elbow pads and protective cups and supporters. No prior knowledge or skills are required in order to take part in this program. Please list any physical or other conditions, medications the participant is taking, dietary restrictions, allergies, or other information which may be necessary and helpful to insure participants' health and safety:

I have read and understand the information provided above. I have noted any physical or medical conditions the participant has which might effect his/her participation. He/she meets the standards required for participation and will have the necessary equipment, which will be in good working condition. T-shirts are provided for team identification. I assume all of the risks normally incidental to the nature of this activity, including risks which are not specifically foreseeable. I will follow the rules and regulations provided by the activity leaders/coaches/supervisors.

I, the undersigned, hereby agree to release, indemnify, save and hold harmless the Town of Pelham, the Parks and Recreation Dept., its employees, agents, representatives, coaches or volunteers from any and all liability, actions, causes of actions, debts, claims or demands of any kind for property damage or personal injury resulting from failure to obey safety regulations and directions of the activity leader or resulting from the exercise of judgment by the leader in good faith response to emergencies and exigencies which occur during the activity; provided, however, that nothing contained herein shall excuse any of the leaders to act with reasonable care for the safety of the participant during the course of the activity appropriate to the circumstance.

You have my permission to have a physician attend to my son/daughter, if it is deemed necessary, during his/her participation in the above activity. I give my permission for any videotaping or other photographs taken in which my child/children may appear and understand that Pelham Parks and Recreation may remove any child from the program as it deems necessary concerning the zero tolerance policy of appropriate behavior.

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Executed this day of	, 2016	
	Parent/guardian signature	
In case of emergency and the parents/guardi	ans cannot be reached, please contact:	
Name:	Relation	
Town/City/State	Telephone	
Basketball Camp Instructor: Brianne Caira.	Emergency info card required for each participant (see P&R office).	
FOR OFFICE USE: Checks payable to Town	of Pelham. \$75.00/player.	

______ fee paid ______ check number

Circle one: MC VISA