



3rd-5th Grade Basketball

This instructional program is designed to help participant's improve their skills.

Who: Boys & Girls in 3rd -5th Grades

When: Tuesdays & Wednesday
Starting November 9th - March 14th

Time: 3:30 - 4:45 p.m.

Where: King Street School

Fee: \$75 (Please make checks payable to Port Chester Recreation)
Mail checks to: Port Chester Recreation, 222 Grace Church Street,
Port Chester, NY 10573



3rd -5th Grade Basketball Fee: \$75

Name _____ Phone _____

Address _____ Age _____

Grade _____ School _____

Emerg Contact _____ Emerg # _____

Special Concerns _____

I agree that I hold the Village of Port Chester Recreation Department, the Village itself, and each of it's officers, members, employees, and agents and the Port Chester School District blameless for injury sustained by my child, however caused, in the course 3rd -5th Grade Basketball as described above, and I agree that neither I nor anyone on my behalf shall prosecute any claim or course of action against the Village of Port Chester, the Recreation Department or any of it's officers, members, employees or agents because of any such injury, however caused. I understand that the Village of Port Chester does not carry accident insurance. I have informed the Port Chester Recreation Department of any physical restrictions or limitations my child may have. In the event of an accident or illness. I give permission for my child to receive medical treatment.

Parent/Guardian Signature _____ Date _____