

The City of Parma Recreation Department in Partnership with the Parma City Schools will be hosting



PARMA PRIDE



ADAPTIVE SPORTS & RECREATIONAL ACTIVITIES

@ PLEASANT VALLEY ELEMENTARY SCHOOL * 9906 W. PLEASANT VALLEY ROAD

THIS SESSION WILL BE FOCUSING ON BASKETBALL/RACQUET SKILLS

This **FREE** program is offered to individuals with special needs that may benefit from an adapted recreation program. Parma Pride, directed by Greg Karaffa, offers a variety of sport related activities that are fun and adapted to fit the needs of those individuals that want to learn and develop additional skills.

We will strive to make this a successful and *enjoyable* experience for our youth participants Preschool through adult. We hope to build motor skills as well as a strong understanding of all the activities involved. Parents or a family member are encouraged to participate alongside their athlete so the skills can be utilized at home and in the community.

GRADES PRESCHOOL – 4TH
From 5:30 p.m. – 6:30 p.m.

GRADES 5TH – 12TH +
From 6:45 p.m. – 7:45 p.m.

SESSIONS DATES:

Thursday, March 21st / Tuesday, March 26th / Thursday, March 28th

Please complete registration no later than **Monday, March 18, 2024** your options are as follows:

- 1) Register online @ activenet.active.com/paramarec.
- 2) Mail to Parma Recreation Department, 7335 Ridge Road – Parma, Ohio 44129
- 3) Drop off during Recreation Department hours between 8:30 a.m. and 4:30 p.m., Monday through Friday.
- 4) Drop off at the DROP-OFF BOX by front entrance of the Recreation Building (7335 Ridge Road)

For any questions, please contact the Parma Recreation Department at 440-885-8144.

SELECT THE APPROPRIATE CLASSIFICATION:

Grades Preschool – 4th Grade

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Grades 5th – 12th +

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If Child is new to the program:

PLEASE CIRCLE SHIRT SIZE:

YOUTH: S M L

ADULT: S M L XL XXL

**If the child has a lime green shirt, please consider using that shirt for this session.*

Student's Name: _____
(Please Print Clearly)

Address: _____

City: _____ Zip: _____ Phone: _____

Email Address: _____ D.O.B.: _____

Age: _____ Grade: _____ School Attending: _____

I understand that the Recreation Department, their employees, volunteers, independent contractors or sponsors WILL NOT be held responsible for any injuries suffered on or off the premises or while en route to or from the activities affiliated with City Recreation programming. I shall be personally responsible for any and all medical and hospital fees and expenses that may be incurred. I understand that NO supplemental insurance is offered. I understand this application may authorize representatives of Parma Recreation Department to seek emergency medical care for the child named above. As such, I also agree to allow the Parma Recreation Department to obtain medical services for my child if the need arises and I can not be reached for emergency care. I understand and agree that the City of Parma shall be allowed to take photographs, videos and or/write stories, of events related to the above-mentioned activity. The above-named participant may appear in said videos, photographs and stories and is not entitled to any other consideration besides being able to participate in said activity. Any falsification of information on this registration form could result in forfeiture of the activities.

(Parent/Guardian Signature)