

The City of Parma Recreation Department
will be hosting



PARMA PRIDE



ADAPTIVE SPORTS & RECREATIONAL ACTIVITIES

AT

MICHAEL A. RIES YOUTH COMPLEX – 5000 FORESTWOOD DRIVE

This **FREE** program is offered to individuals with special needs who 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 who want to learn and develop additional skills.

THIS SESSION WILL BE FOCUSING ON BASEBALL SKILLS

PLEASE SELECT THE APPROPRIATE CLASSIFICATION:

Grades Preschool – 4th Grade
From 9:30 a.m. – 10:30 a.m.

Grades 5th – 12th
From 10:45 a.m. – 11:45 a.m.

SESSIONS WILL BE HELD

WEDNESDAY, JUNE 8th Field #5
WEDNESDAY, JUNE 15th Field #5
WEDNESDAY, JUNE 22nd Field #5
WEDNESDAY, JUNE 29th Field #5

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PLEASE SPECIFY SHIRT SIZE:

PLEASE CIRCLE SHIRT SIZE: YOUTH: S M L ADULT: S M L XL XXL

*Shirts are courtesy of Mayor Tim DeGeeter

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 a community.

ONLINE REGISTRATION AVAILABLE @ activenet.active.com/paramarec

OR Please return this complete registration form no later than **Monday, June 6, 2015** by:

- 1) Mailing to Parma Recreation Department, 7335 Ridge Road – Parma, Ohio 44129
- 2) Dropping off during Recreation hours between 8:30 a.m. until 4:30 p.m.
- 3) Dropping off at the DROP-OFF BOX in front of the Recreation Building.
**Our office is located at the old Parma South Library (at Ridge and Pleasant Valley Roads)*
- 4) Dropping off at Pleasant Valley Elementary School during school hours.

Each participant will be notified by mail or email for confirmation.

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

Students Name: _____

(Please Print Clearly)

Address: _____

City: _____ Zip: _____ Email Address: _____

Phone: _____ Emergency Phone: _____

Age: _____ Grade: _____ D.O.B. _____ School Attending next year: _____

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)