



Jersey Shore P.A.L. @ GOODSPORTS USA

Limited Spots Available - Sign up today!

SPRING 2014 PROGRAMS

Rec Sports Camp \$125

Program participants will play a sport in round robin format each week for 6 weeks. All program enrollees will be separated and grouped together to form teams, and all evening long they compete against each other.

Week 1: Soccer **Week 2:** Dodge Ball **Week 3:** Soft Hockey
Week 4: Wiffle Ball **Week 5:** Flag Football **Week 6:** Kickball

DATES: WEDNESDAY MARCH 5TH-APRIL 9TH

AGES/TIMES: 4 to 6 years (6-7pm) 7 to 13 years (7-8pm)



Youth Dodgeball \$125

Please wear sneakers only (NO cleats!) Dodgeball league is played 6v6 (6 players on the field) with a 7 player min. and 10 player max. per roster. Games are 45 minute and played on our new indoor orange turf arena. Divisions will be broken into age groups. Teams are welcome!

DATES: MARCH 3RD - APRIL 7TH (6 WEEKS)

DAY: MONDAYS

TIMES: 5:30-7:30PM (50 MINUTE GAMES)

AGES: Boys & Girls ages 6-13



Tiny Tots Crafty Kids \$75

Designed for children and their parents to gather together to enjoy songs & activities for 60 minutes of fun! Activities include painting, play dough, arts and crafts and more... A 6 week session. **(parent/child program)**

DATES: FEB. 6TH - MARCH 13TH

DAY: THURSDAYS

TIME: 1:30-2:30PM

AGES: AGES 2 - KINDERGARTEN



Tiny Tots Gym \$75

Designed for children and their parents to engage in active recreation gym time together. The program is designed to burn energy and help children develop physical skills. Activities include musical movement, tumbling, parachute, beanbags, games, tag and more...

DATES: FEB. 6TH - MARCH 13TH

DAY: THURSDAYS

TIME: 10:00-11:00AM

AGES: Ages 2 - K (parent/child program)

POLICE ATHLETIC LEAGUE Located at **GOODSPORTS USA** 2903 HWY 138, WALL, NJ 07719

732-749-3620 kdwyer@jerseyshorepal.org WWW.JERSEYSHOREPAL.ORG ****ONLINE REGISTRATION****

JERSEY SHORE P.A.L. SPRING 2014 REGISTRATION

Please use 1 form per child. Download additional registration forms online: www.jerseyshorepal.org

| | |
|---|---|
| Parent/Guardian Name: _____ | Address: _____ |
| Phone: _____ | City: _____ State: _____ Zip: _____ |
| Home # _____ Cell # _____ | Email Address: _____ |
| Work # _____ | |
| Child Name _____ | DOB: ___/___/___ Age: ___ Grade: ___ <input type="checkbox"/> Boy <input type="checkbox"/> Girl |
| Please list any known medical issues, medication, and/or known allergies: _____ | |

CHECK ALL PROGRAMS AND AGE GROUPS YOU ARE REGISTERING FOR.

| |
|---|
| <input type="checkbox"/> RECREATION SPORTS CAMP / \$125 <input type="checkbox"/> 4-6 YEARS OLD <input type="checkbox"/> 7-13 YEARS OLD |
| <input type="checkbox"/> YOUTH DODGEBALL / \$125 |
| <input type="checkbox"/> TINY TOTS CRAFTY KIDS / \$75 |
| <input type="checkbox"/> TINY TOTS GYM / \$75 |

REQUIRED EQUIPMENT:

REC CAMP: ATHLETIC ATTIRE, SNEAKS, AND WATERBOTTLE

DODGEBALL: ATHLETIC ATTIRE, SNEAKS, AND WATERBOTTLE

TINY TOTS CRAFT KIDS: OLD CLOTHES AND ART SMOCK

TINY TOTS GYM: ATHLETIC ATTIRE, SNEAKS, AND WATERBOTTLE

DISCOUNTS:

10% off sibling registration fee or 10% off if you register for more than one program (No multiple discounts)

PAYMENT INFORMATION: All balances MUST be paid in full at time of registration. NO REFUNDS WILL BE GIVEN.

Total Amount Due: \$ _____ Cash Check Credit Card: Visa MC DSCV AMEX

Card No. _____ Exp. Date: ___/___/___ Signature: _____

Please read carefully and sign the following Registration-Understanding/Waiver.

In consideration for being allowed to participate in any way in GOODSPORTS USA/P.A.L. athletic/sports programs, and related events, I the undersigned voluntarily agree to assume full and complete responsibility for any injury or accident which may occur to the above named child during or in connection with GOODSPORTS USA/P.A.L. or it's staff while they/I am on the premises of GOODSPORTS USA/P.A.L. I acknowledge that at GOODSPORTS USA/P.A.L., I/they will participate in activities that may involve, among other things, physical contact with persons or objects, including the ground, and may incur a risk of injury. I specifically waive, give up and release GOODSPORTS USA/P.A.L. and its staff, from all liability for any claim for damages which I/the above named child may have relating to injuries or illness that I/they may sustain. In signing this waiver, I certify that I/the above child are in good health, with no chronic illness or abnormal tendencies. In the event of an emergency in which I/the above child requires medical care, I authorize GOODSPORTS USA/P.A.L. to act for me and obtain whatever medical, surgical or dental examination, diagnosis and/or treatment is deemed necessary. GOODSPORTS USA/P.A.L. is not responsible for my personal belongings which are lost, stolen, or damaged. I agree to have all fees paid in full before the first game. I further understand that I should be aware of my/the above named child's physical limitations and agree not to exceed them. I agree to review the rules and inspect the facilities and if I believe it is unsafe I will advise his or her coach and refuse to participate. GOODSPORTS USA/P.A.L. reserves the right to cancel or change any scheduled events.

 SIGNATURE: _____ PRINT NAME: _____

PLEASE SEND FORM & PAYMENT TO: JERSEY SHORE PAL 2903 HWY. 138, WALL, NJ 07719