BASKETBALL for Grades 1 & 2

Susan Silver, Bromfield Physical Education teacher, Coach

Assisted by Bromfield Basketball players!

Come have fun after school in the gym while learning basketball skills! Practice passing, dribbling, shooting baskets and playing games! Children will be taught basic individual skills and learn how important it is to play as team!

5 Thursdays, February 16, March 2, 9, 16, 23, 2017

3:15-5 p.m. Minimum: 12 Maximum: 24

HES Gym Fee: $75

Class size is limited. Registration is on a first-come first served basis .

Late pick-up will result in a $1.00 per minute fee payable immediately to the instructor.

REFUND POLICY: No refunds will be issued. Check will be returned only if a class is cancelled.

Please know that it is the policy of the Harvard Public Schools not to discriminate on the basis of race, color, sex, gender identity, religion, national origin, age, disability, or sexual orientation in its educational programs, activities or employment policies as required by Title IX of the 1972 Educational Amendments, Chapter 199, and Section 504 of the Rehabilitation Act of 1973. The district compliance coordinator is Marie Harrington, Director of Pupil Services, 978-456-4143.

Harvard Community Education, 39 Massachusetts Ave., Harvard, MA 01451
978-456-4118 jcavanaugh@psharvard.org

SPECTRUM REGISTRATION FORM - Basketball Grades 1 & 2
Use this form or register online at www.psharvard.org

Name_____ Grade/Teacher_____

Allergies_____

Address_____BUS#_____

Home Phone_____CELL#_____

e-mail_____

Parent Name_____

Emergency Contact & phone_____
(Other than parent, in case parent cannot be reached)

Make check payable to: **Town of Harvard**, 39 Mass. Ave., Harvard, MA 01451
*Non Residents (does not include School Choice) please add $10 non-resident fee

NOTE: If using the Unipay/online payment system, the registration form **MUST** be completed and returned to the Community Ed office in order to register for a class. **Paying online does not register you for a class!**

Basketball Grades 1 & 2 $75

I, the undersigned, attest I am the parent or legal guardian of the above named child who attends the Community Education/SPECTRUM program and agree to allow him/her to participate in the above listed SPECTRUM class. I further agree to indemnify and hold harmless the staff, administrators, and official assistants and to absolve them from any and all liability arising from my child's participation in this activity.

I have read and am fully aware of the policies (ie. late pick up, refunds etc.) of Harvard Community Education and the SPECTRUM Program.

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PARENT/GUARDIAN SIGNATURE DATE

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