

Sports & Games 2018 Grades 4-7

July 30-August 3, 2018
9:00 a.m.-3:00 p.m.

Alexa Cavanaugh, B.A., M.Ed



Come have some fun in the gym with your friends! We will play volleyball, basketball, soccer, cooperative games and more, just for the fun of it! Don't forget your water bottle. We will provide an ice cream treat each day, and have pizza for lunch on Friday. (Bring your own lunch Monday-Thursday.) Students must be registered to attend. *Minimum enrollment must be met by June 22nd. Don't wait!* Register today!

July 30-August 3, 2018
9 a.m.-3 p.m.
HES Gym

Monday-Friday
Minimum: 12 Maximum: 20
Fee: \$190

Only need a half-day? Contact the Community Education office for availability.

Class size is limited. Registration is on a first-come first served basis as received in the Community Education office.

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

Tuition is Non-Refundable. Check will be returned only if a class is canceled.

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, 978-456-4118 jcavanaugh@psharvard.org

Harvard Community Education 978-456-4118
Community Education REGISTRATION FORM - SPORTS & GAMES

Name _____ Gr Fall 2018 _____

Allergies _____

Address _____

Home Phone _____

e-mail _____

Parent Name _____

Parent Work Phone _____ Cell # _____

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

If using the Online Payment Center, please be sure to email the payment confirmation number to: jcavanaugh@psharvard.org

I, the undersigned, attest I am the parent or legal guardian of the above named child who attends the COMMUNITY EDUCATION program and agree to allow him/her to participate in the above listed 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.

PARENT/GUARDIAN SIGNATURE

DATE

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