

SUMMER GYM 2019 *Grades 1-4*

June 24-28 1-4 p.m.

Instructor: Alexa Cavanaugh



Come have some fun in the gym with your friends! We will play volleyball, indoor soccer, Capture the Flag, cooperative games and more. Just for the fun of it! What's your favorite? Don't forget your water bottle. We will provide a popsicle/ice cream treat each day, Register today!

**June 24-28, 2019 Monday-Friday
1-4 p.m. HES Gym**

**Class Limit: 20
Fee: \$139*see Note**

***NOTE: Need a full day? Register for BOTH Harvard Hoops, Jr. (9 a.m.-Noon) and Summer Gym, you may deduct \$10 off the Summer Gym fee and pay \$129. Bring your lunch!**

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

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

REFUND POLICY: Fee 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 - SUMMER GYM 2019**

Name _____ Gr Fall 2019 _____

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

NOTE: If paying online through the Online Payment Center, please forward the Payment Confirmation Number to jcavanaugh@psharvard.org. We do not receive notification from the bank when a payment is made.

Both registration AND payment must be received to be placed on the roster.

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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