

RIDGEWOOD

SPRING SPORTS PROGRAMS FOR 2 TO 5 YR OLDS



In association with
Ridgewood Parks & Recreation



OFFICIAL NIKE
PARTNER CAMP

T-BALL WEEKLY CLASSES (7 week class)

Open to both boys & girls, this program focuses on developing basic t-ball techniques, including hitting, throwing, catching, and base running.

Level	Age	Day	StartTime	EndTime	StartDate	EndDate	Price
Parent & Me	2 to 3	Thu	10:45 AM	11:45 AM	25-Apr	6-Jun	\$140
Squirts	3 to 5	Thu	10:45 AM	11:45 AM	25-Apr	6-Jun	\$140
Squirts	3 to 5	Thu	12:30 PM	1:30 PM	25-Apr	6-Jun	\$140
Squirts	3 to 5	Thu	1:45 PM	2:45 PM	25-Apr	6-Jun	\$140

Classes held at Veterans Field North/ Make up June 13 & 20

MULTI-SPORTS WEEKLY CLASSES (7 week class)

Learn and play a variety of sports throughout the program including lacrosse, soccer, t-ball, and track & field!

Level	Age	Day	StartTime	EndTime	StartDate	EndDate	Price
Parent & Me	2 to 3	Tue	10:45 AM	11:45 AM	23-Apr	4-Jun	\$140
Squirts	3 to 5	Tue	10:45 AM	11:45 AM	23-Apr	4-Jun	\$140
Squirts	3 to 5	Tue	12:30 PM	1:30 PM	23-Apr	4-Jun	\$140
Squirts	3 to 5	Tue	1:45 PM	2:45 PM	23-Apr	4-Jun	\$140

Classes held at Veterans Field North/ Make up June 11 & 18



Ages 2 -5 | All Abilities | Boys & Girls

Visit us online for full class details, learning objectives and more!

TO REGISTER

Ridgewood Parks and Recreation

Online: RIDGEWOODnj.net/communitypass
Phone: (201) 670-5560 (informational purposes)
In Person: The Stable, 259 N Maple Ave, Ridgewood, NJ

CONTACT USSI

Online: USsportsInstitute.com
Phone: (866) 345-BALL
Email: Info@USsportsInstitute.com

SPRING REGISTRATION FORM

REGISTRATION FORM

PROGRAM & FAMILY INFORMATION

1 Players Name _____ Age _____ DOB _____

Season _____ Program _____ Day _____ Time _____

Fee _____

Yes, this player has individualized needs due to a disability & I would like to be contacted regarding reasonable accommodations

2 Players Name _____ Age _____ DOB _____

Season _____ Program _____ Day _____ Time _____

Fee _____

Yes, this player has individualized needs due to a disability & I would like to be contacted regarding reasonable accommodations

Parents Name (if the player is under 18) _____

Address _____ Apt # _____

Town _____ State & Zip _____

Primary Contact # _____ Cell Phone # _____

Email _____

PAYMENT METHOD

Total Cost of Programs: _____

TOTAL PAYMENT: _____ Checks payable to: **Ridgewood Parks & Recreation**

Mailing Address: Ridgewood Recreation, 259N Maple Ave, Ridgewood, NJ, 07450

Phone Number : (201) 670-5560 (informational purposes only)

WAIVER & OTHER INFORMATION

Please list all additional medical information by enclosing additional written documents when you register

- 1) Your cleared check is confirmation that your place is confirmed.
- 2) All Programs are non refundable
- 3) The program will be cancelled if minimum registration numbers are not met.

Medical Cancellation: If a medical emergency arises and you submit medical documentation stating that the registrant cannot participate, USA Sport Group will issue a credit voucher** for any time missed (affected dates must be notated on the medical documentation submitted).

Weather Policy. Cash refunds or credits will not be issued in the event of any adverse weather cancellation. Registration for any class/camp should come with the understanding that a portion of may be impacted or canceled due to adverse weather conditions.

Spring, Fall or Winter Programs (Weekly sessions): Any single session that is canceled in its entirety by USA Sport Group due to adverse weather conditions, will have lost time compensated by utilizing the prearranged make-up date. In the unlikely event of more than one weather cancellation during the spring, fall or winter sessions, USG cannot guarantee any further make-ups and/or compensation for lost time. **Summer Programs & School Vacation Camps** Where possible USG will work with the host organization to secure an indoor facility in case of inclement weather. In the event of an adverse weather cancellation, programs will not be made-up or compensated for missed time.

USSI & Ridgewood Recreation Waiver and Hold Harmless Agreement. I hereby agree to let my child participate in this activity. I understand that there are certain risks of injury inherent in the practice and play of this sport, as well as in traveling and other related activities incidental to my participation, and am willing to assume these risks. I hereby certify that my child is fully capable of participating in the sport and that he/she is healthy and has no physical or mental disabilities or infirmities that would restrict full participation in this activity, except as included in writing with this application. In addition to giving full consent for my child's participation, I do hereby waive, release and hold harmless US Sports Institute Inc & Ridgewood Recreation, its officers, coaches, sponsors, partners, supervisors and representatives for any injury that may be suffered by my child in the normal course of participation in the sport and the activities incidental thereto, whether the result of negligence or any other cause. I grant permission for my child to receive emergency medical treatment.

Signed: _____ Date: _____



By Mail: Ridgewood Recreation Dept, The Stable, 259 N Maple Ave, Ridgewood, NJ 07450

Online: www.ridgewoodnj.net/communitypass

In Person: The Stable, 259 N Maple Ave.

By Phone: (201) 670 5560 (informational purposes)

