

SKY HAWKS "Teaching Life Skills through Sports"

Sky Hawks has been a recognized name in delivering quality sports programs for children and young adults for over 25 years. Sky Hawks believes that every child should experience the joy and benefits of athletics. All Sky Hawks programs are focused on developing and building the skills and confidence of young athletes in a fun and safe environment. The Mini & Mighty Hawks programs introduce sports to younger children and allow them to learn and have fun in a variety of arenas.

Sky Hawks offers safe and positive athletic experiences for young athletes. Teamwork, winning and losing, and sportsmanship are critical lessons for athletics and life. Sky Hawks is a nationwide organization whose goal is to teach children and young adults life skills through athletics.

Bridgewater Recreation and Sky Hawks are once again offering programs with the best progressive sports curriculum available. Sky Hawks provides athletic programs that build foundations of healthy and active lifestyle choices while encouraging kids to have fun.

In order to provide top quality instruction, each Sky Hawks program is based upon three things: Safety, Fun, and Skill Development. In addition, Sky Hawks programs are non-competitive, and promote sports in a positive and enthusiastic manner. Children should wear appropriate clothing including navy and gray shirts, sneakers or running shoes, sunscreen, and bring two snacks and a plastic water bottle.

The cost is \$125.00. The program will be held at Legion Field from 9:00 A.M. until noon. Each program will have two sessions, each one-week long:

Session One: August 3 - 7

Session Two: August 10 - 14.

MINI HAWKS

Aimed at children from ages 4 - 6, this program promotes fun while teaching the basic skills and team strategies for soccer, baseball, and basketball.



MIGHTY HAWKS

Designed for the slightly older child, the Mighty Hawks program is aimed at children from ages 6 - 8. The program is tailored to build knowledge and enjoyment of organized sports. The focus remains on teaching the fundamentals through creative and constant participation. There is increased emphasis placed on understanding the rules, etiquette and skills of the sport.

Director: Dennis Mannone, Sky Hawks Organization



BRIDGEWATER RECREATION COMMISSION
in cooperation with... SKYHAWKS presents...

SPORTS PROGRAMS FOR KIDS: SKY-HAWKS ~ 2009

Participant Name _____

Date of Birth _____ Age _____ Gender: M / F (Circle one)

Parent Name _____

Address _____

E-Mail _____

Telephone _____ Work # / Beeper _____

Emergency Contact _____

Telephone _____ Work # / Beeper _____

<u>Session</u>	<u>Program</u>		<u>Fee</u>
<input type="checkbox"/> Session 1 (Aug. 3 - 7)	<input type="checkbox"/> Mini-Hawks	<input type="checkbox"/> Mighty Hawks	\$125.00
<input type="checkbox"/> Session 2 (Aug. 10 - 14)	<input type="checkbox"/> Mini-Hawks	<input type="checkbox"/> Mighty Hawks	\$125.00

I, the undersigned parent/guardian of the individual named above, a minor, do hereby agree to allow the individual named herein to participate in the aforementioned activity and authorize the program directors and/or instructors as Agents for the undersigned to consent to Medical, Surgical and/or Dental Examination, in addition to any and all of the Treatments that may be deemed necessary by medical personnel. It is understood that this activity involves an element of risk and a danger of accidents and knowing those risks I hereby assume those risks. In addition, I understand that by signing this agreement, I hereby release and discharge Skyhawks and Bridgewater Recreation Commission from any and all liability resulting in injury associated with participant's participation in this activity. I agree that pictures taken during program hours may be used for future promotional purposes. In the absence of a parent/guardian's signature below, payment of fees and participation in the program shall constitute acceptance of the conditions set forth in the release. Skyhawks will not provide health and/or accident insurance for program participants. As the undersigned parent/guardian I understand that no confirmations will be mailed and no refunds will be given. Further, this verifies that the participation is up to date with his/her immunizations and is able to participate in all activities.

Signature

Date

Mail registration form and fee to: Bridgewater Recreation Commission
Town Hall – 64 Central Square
Bridgewater, MA 02324

Make checks payable to: Bridgewater Recreation Commission



BRIDGEWATER RECREATION HEALTH FORM

Please fill out the safety precautionary form below and return it by the first day of the program. A physical examination is not required. Please fill in any information we may need in case of an emergency.

Name _____ Date of Birth _____

Parent/Guardian Name: _____

Address: _____ Home Phone: _____

Work Phone: _____ Beeper #: _____

**** PLEASE BE AWARE WE DO NOT ADMINISTER MEDICATION ****

IN CASE OF EMERGENCY, NOTIFY:

1. Name: _____

Telephone: _____ Relationship: _____

2. Name: _____

Telephone: _____ Relationship: _____

FAMILY PHYSICIAN: _____

TELEPHONE: _____ ADDRESS: _____

IF INJURED, DO YOU HAVE A HOSPITAL PREFERENCE? _____

IF THERE ARE ANY OTHER INSTRUCTIONS OR PRECAUTIONARY MEASURES ABOUT YOUR CHILDREN THAT OUR COUNSELORS OR EMERGENCY PERSONNEL SHOULD BE AWARE OF, PLEASE STATE:

IN THE EVENT I CANNOT BE REACHED IN AN EMERGENCY, I HEREBY GIVE PERMISSION TO THE PHYSICIAN, SELECTED BY THE ADULT LEADER IN CHARGE, TO HOSPITALIZE, ADMINISTER PROPER ANESTHESIA, OR TO ORDER INJECTION OR SURGERY FOR MY SON OR DAUGHTER.

SIGNATURE _____ DATE _____

PARENT OR GUARDIAN