

HARRISON RECREATION DEPARTMENT

MOUNTAIN RUNNERS

WHO: 5TH- 8TH GRADERS
WHAT: A GROUP OF YOUNG TEENAGERS WHO WANT TO GET BETTER AT JOGGING
WHERE: STARTING AT WEST HARRISON PARK AND RUNNING AROUND TOWN
WHEN: DATES-7/6, 7/8, 7/13, 7/15, 7/20, 7/22
TIME: 4PM-5PM (IF NECESSARY, WE WILL DO ANOTHER CLASS FROM 5:30-6:30)

WHY: DID YOU KNOW THAT JOGGING IS ONE OF THE BEST WAYS TO GET INTO SHAPE? COME JOIN US ON MONDAY AND WEDNESDAY AFTERNOONS, AFTER THE SUMMER HEAT HAS COOLED OFF A BIT, FOR A JOG AROUND WEST HARRISON. IF YOU HAVE NEVER BEEN INTERESTED IN RUNNING OR YOUR AN AVID RUNNER, THIS WOULD BE A GREAT SESSION FOR YOU TO JOIN. WE WILL GAUGE THE RUNNING ABILITY OF THE GROUP EARLY ON AND THEN HIT THE STREETS OF SILVER LAKE ON A SKILL APPROPRIATE JOG. GET READY FOR YOUR UPCOMING TRACK AND FIELD SEASON, ANY OTHER SPORT YOU MAY PLAY, OR COME OUT FOR A NICE AFTERNOON JOG. GRAB YOUR SNEAKERS, A WATER BOTTLE, A PAIR OF HEADPHONES AND LET'S GO!

PRICE: \$50 FOR 6 SESSIONS

Name_____ Sex_____ Phone_____

Address_____ Town_____ State_____ Zip_____

School child attends_____ Grade in Sept 2020_____

PLEASE PRINT PARENT'S EMAIL ADDRESS IN BOXES PROVIDED BELOW

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CIRCLE ONE: .COM .NET .ORG .EDU .GOV OTHER_____

Date of Birth: Month_____ Day_____ Year_____
(required to participate)

*****NOTE:** We will be adhering to all up to date Safety & Social Distancing Guidelines. You will receive an email the week prior on instructions and/or what you need to do/bring.

Due to
LIMITED ENROLLMENT
Please Call (914)835 – 3130 to Register
(Do NOT leave voice message)

OFFICE USE ONLY: CHECK #_____ AMOUNT_____ RECEIVED BY_____ DATE_____
in consideration of your accepting this registration, I, the undersigned, for myself, my executors, administrators, assignees, do hereby release and discharge the Town-Village of Harrison and the Harrison Recreation Department, and any and all sponsors, organizers and their representatives and successors from all claims of damages, demands, action and causes of actions whatsoever, in any manner arising or grown out of my child's participation in said program.

Parents Signature_____