





June Beginners

On Thursdays @HJ Carroll Park

Meet at the Basketball Courts



Beginner Sports is Back for Thursdays in June! Watch your young athlete grow and shine in the world of sports! Enter your 2.5-5 year old in Beginners Sports! This co-ed program is designed to help your child develop their hand-eye coordination and teamwork skills, while learning the basic fundaments of Soccer, T-Ball, and Basketball. Come join us at HJ Carroll Park and have some fun this June!

To Register:

Registration forms located at the JeffCo Rec Center and on our website: www.countyrec.com

Online Payment Option

OR

Register by Mail

Send payment (cash or check) with signed completed Registration form to:

Jefferson County Public Works 623 Sheridan Street Port Townsend, WA 98368

*Make checks payable to Jefferson County Parks and Recreation

Choose a Session (s)

Thursdays June 5, 12, 26, and July 3 (Max Participants: 12)

___ 2.5 - 3.5 year olds: 11:30-12:15 ~ \$30

____ 3.5 - 5 year olds: 12:30-1:15 ~ \$30

___ 3.5 - 5 year olds: 1:30-2:15 ~ \$30

*No class Thursday, June 19th: Holiday

What to bring??

You know your kid best...do they need snacks? A water bottle? Sunscreen and a hat? Be sure and come prepared with what will help your child succeed in their class. We will Provide all the sporting equipment for each class.

Sam Miller

smiller@co.jefferson.wa.us

Work: 360-385-2221/ Cell: 360-531-4960

www.countyrec.com ~ 360.385.2221





Jefferson County Parks and Recreation/623 Sheridan Street/Port Townsend, WA 98368 Šam Miller at smiller@co.jefferson.wa.us / 360.531.4960 JeffCo Rec. Center in Port Townsend / 360-385-2221

Beginners Sports 2025					
Participant First Name	Last	Age	e Grade	_ MF	_ Birthday
Mailing Address					
Parent/Guardian One First Na	ame		Last		
Parent/Guardian Two First Na	ame		Last		
Home Phone	Alternate	e Phone	E-ma	ail	
Emergency Contact		/	Allergies? If y	es, what	
	<u>ASSUMPT</u>	ION OF RISK, RELEASE O	F LIABILITY AND CON	NSENT_	
		Please Read Ca	refully		
All participants are advised that Jefferson climbing, hiking, swimming, or running) lieved by any preventive measures, whet of the overall program shall be entirely the	, present a risk of injur her restrictive rules, tra	y higher than that which peop	le normally face in their ediscipline. The decision w	everyday lives. The	is risk of injury cannot be wholly re- in any particular activity that forms par
On behalf of my minor child, (or on my bility or death that arise from participatic JCPR in order to inform myself fully on accordingly assume full and sole responsemental condition which may affect my all	n in the JCPR Program this subject. Based on t ibility for my (or my n	n. I acknowledge that I have ha that full understanding, I freely ninor child's) participation in t	nd full opportunity to disc and knowingly assume a the JCPR Program. I unde	cuss the nature and all such risks, whe erstand that I must	I extent of these risks with officials of the ther specifically known and unknown. report any existing medical, physical of
On behalf of myself and on behalf of my or agents of those entities, including as w minor child's involvement in any aspect leased in the previous sentence on not, to	rell any third party spoof the JCPR Program.	nsors of JCPR but not limited This release applies whether the	to damage to property, pe	ersonal injury, disa	ability or death, resulting from my or m
To the fullest extent allowed by law, I, for indemnify and hold harmless all the parting to provide indemnity shall apply to the party's negligence.	es released in Article 3	hereof from and against any	and all liabilities arising f	rom my participat	ion in the JCPR Program. This underta
On behalf of myself and on behalf of my website (www.countyrec.com) or available	minor child, we have a le at the Rec Center 62	read and understand the Cond 20 Tyler Street or the Public W (Fill in the Blanks Below	orks Office 623 Sheridar	t which is availabl n Street in Port To	e on the Jefferson County Parks and Rownsend.
I HAVE READ THIS ASSUMPTION NATURE I GIVE UP CERTAIN RIG under the terms as set forth in this Ass the County Rec Beginners Sports Pr	HTS I MIGHT OTHI umption of Risk, Rele	ERWISE HAVE UNDER LA	AW. I hereby consent to	allow my child t	o participate in the JCPR Program
\Longrightarrow					
Signature of Parent or Guardian	Date	Signature of Participant	t (18 Years & Old	der) Date	
		PHOTOGRAPH - VID	EO CONSENT		
I hereby grant permission for myself publication by print media, INTERNE tion of photographs/video taken of me	T newspaper, televis	otographed or videotaped, w iion, video or motion picture	vithout compensation, b . I additionally consent	by JCPR, unders to the use of my	tanding that the same is intended for name in connection with the public
\Longrightarrow					
Signature of Parent or Guardian	 Date	Signature of Participant	t (18 Years and O	lder) Date	