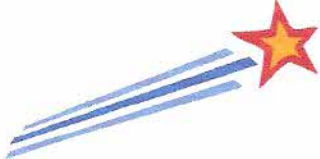
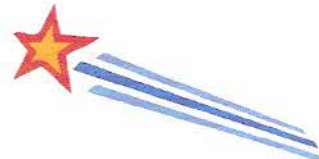


Pomfret Recreation Dept. Sponsors

Player Development Basketball Clinic



HOOPS



Saturday, March 24, 2012
2:00 to 5:00 pm. At the
Pomfret School Field House

Boys & Girls ages 6—14 are eligible
(separated by age)

COST: \$25.00 per person—Pomfret Resident
\$30.00 for out of town participants

Clinic is limited to 80 participants

All participants receive a clinic basketball



HEAD COACH IS MR. JAN KOIVISTO assisted by local college and high school varsity players.



Player Development Basketball Clinic on 3/24/12 at the Pomfret School Field House.

Please mail and make your checks payable to: Pomfret Recreation Dept., 5 Haven Rd, Pomfret Center, CT 06259

Name: _____ DOB: _____ Grade _____

Address: _____ School: _____

Home Ph. # _____ Cell/Emerg. # _____ Email: _____

Does your child have any medical issues that we should be aware of? _____

Check # _____ = \$25.00 or \$30.00 (OUT OF TOWN) Total Paid _____ Waiver & Release: I hereby authorize the sponsors of the Player Development Basketball Clinic to act for me according to his/her best judgment in an emergency requiring the medical attention of my child. I understand that I am responsible for my child in regard to his/her actions or injuries. I hereby release and discharge the Pomfret Rec. Dept., Pomfret School, clinic staff, affiliated entities and their officers, agents and employees from and against all liability or causes of actions arising out of, or in connection with me and/or my child's participation in this clinic. The Rec Dept. Clinic Staff or Pomfret School is not responsible for items left in the field house before, during or after the clinic. Reimbursements are not available after 3/1/11 or if the child does not attend the clinic.

Signature of Parent or Guardian: _____ Date: _____

*In school
1/10/12*