

# Ballston Area Recreation Commission



Tom Slocum, Chairman  
Joan Brown, Director  
61 Eastern Ave.  
Ballston Spa, NY 12020  
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## BARC BOWLING FOR FUN

The Ballston Area Recreation Commission (BARC) will be sponsoring **BOWLING** for 5 weeks on either a **Saturday or Sunday afternoon for Kindergarten through Middle School** or **Tuesday evening for Middle and High school students at Tippy Bowl, 24 Washington St., Ballston Spa.**

**SATURDAY or SUNDAY at 1:00 TO 2:30PM ( Approximate -Depends on how many in group)**

Kindergarten and first grade: Bumper Bowling  
Second through Middle School: Regular Bowling

**Saturday Dates: March 24, 31 April 7, 14, 21**  
**Sunday Dates: March 25 April 1, 8 (No Bowling-Easter), 15, 22, 29**

Kindergarten through fifth grade --Cost: \$35.00 (2 games each week) Includes shoes and ball.  
Middle School (Grade 6-8) --Cost: \$45.00 (3 games each week) Includes shoes and ball.

**TUESDAY EVENINGS- 6:30 TO 8:30PM - March 27 April 3, 10, 17, 24**

**Middle School and High School Students**

**Cost: \$55.00 (Unlimited games in that time frame) Includes shoes and ball. *Glow lights will be on.***

To be eligible children must be residents of the Ballston Spa School district and meet the grade requirements above as of now. There will be no exceptions. Only **ONE CHILD** may be registered on each form. More than one child per form will not be accepted. If more forms are needed they may be downloaded from the BARC website above. **Sign the back of each form.** Copies of forms will only be accepted if they include the signed release section.

- **TIPPY BOWL will provide each child with a trophy for his/her accomplishments.**

**REGISTRATION FORMS AND PAYMENT MUST BE IN NO LATER THAN MARCH 10<sup>th</sup> .**

1. **MAKE CHECKS PAYABLE TO TIPPY BOWL.**
2. **MAIL CHECKS & FORMS TO: BARC, 61 Eastern Avenue, Ballston Spa, NY 12020**
3. Space is limited and on a first come first serve basis.
4. Contact the Recreation Director, at 885-1634, if you would like more information.

(PLEASE PRINT)

STUDENT'S NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ SEX: \_\_\_\_\_  
(Last) (First)

PHONE: \_\_\_\_\_ EMERGENCY #: \_\_\_\_\_

SCHOOL: \_\_\_\_\_ GRADE: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

TOWN: (CIRCLE ONE): Village of Ballston Spa Malta Milton **Town of Ballston**

KNOWN MEDICAL CONDITIONS: \_\_\_\_\_

- If your child/children has a friend/friend he/she would like on his/her lanes, please indicate that in the lines below. We will try to accommodate you.
- Parents are welcome to watch (especially those with younger children).

CHECK ONE: \_\_\_\_\_ SATURDAY \_\_\_\_\_ SUNDAY \_\_\_\_\_ TUESDAY

**If possible, would like to bowl with:**

1. \_\_\_\_\_ Grade: \_\_\_\_\_

2. \_\_\_\_\_ Grade: \_\_\_\_\_

3. \_\_\_\_\_ Grade: \_\_\_\_\_

4. \_\_\_\_\_ Grade: \_\_\_\_\_

5. \_\_\_\_\_ Grade: \_\_\_\_\_

**PLEASE REVIEW AND SIGN RELEASE. INSURANCE REQUIREMENTS WILL NOT PERMIT CHILDREN TO PARTICIPATE WITHOUT A SIGNED RELEASE!**

In consideration of being allowed to participate in any way in the Ballston Area Recreation Commission (BARC) athletic sports program, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation, If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS the Ballston Area Recreation Commission, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event (RELEASEES) WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE.

PARENT/GUARDIAN SIGNATURE

EMERGENCY PHONE #

Printed Name \_\_\_\_\_ Date: \_\_\_\_\_