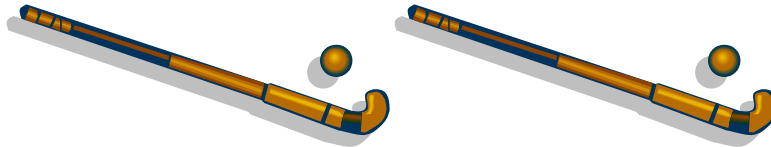




Grades: 5 to 8, Girls Only

- Field Hockey is a Travel Program. 5th Grade will be a clinic with scrimmages on Saturdays.
- We will be playing Montville, Passaic Valley and additional towns in the area.
- The season will run from mid-August through early November.
- Practice sessions will be run clinic style and will consist of skill development, various drills, techniques and game play.
- All participants must provide their own stick and wear shin guards and a colored mouth piece.
- Games are on Saturdays. Practice TBD.
- A limited amount of field hockey sticks are available to use from the Boys and Girls Club to be turned in at the end of season.
- There will be a mandatory parent meeting at the beginning of July.
- Attendance at practice will reflect playing time.
- Open to Wayne residents only.
- Protective eyewear mandatory that meet the ASTM F2713-09 standard for Field Hockey



Fee: \$100 per child

Family discount for three or more children

Registration deadline: June 2, 2018

Late fee: \$5

No refunds/credit will be given after regular registration period has ended

Cancellations prior to deadline will be charged a \$5 processing fee

Mail form and fee to:

Boys & Girls Club of Wayne

153 Garside Ave

Wayne, NJ 07470

973-956-0033

www.bgcwnj.org

www.facebook.com/bgcwnj

not a school sponsored event



Child's Name: _____ Date of Birth: _____
 Address: _____ Age: _____ Grade as of Sept. '18: _____
 City: _____ State: _____ Zip: _____
 Home Phone: _____ Emergency Phone & Contact: _____
 Email Address: _____
 Where did you receive this flyer? _____ Shirt Size (circle one) yl yxl as am al axl

Parent/Guardian Information:

Mother's Name: _____ Work Email _____
 Business Name/Address: _____
 Business Phone: _____

Father's Name: _____ Work Email _____
 Business Name/Address: _____
 Business Phone: _____

Does your child have any impairment? _____

Sponsors: We need sponsors to help defray the cost of our Field Hockey Program. Sponsorships are \$100 and are tax deductible. Your company name will appear on all schedules & rosters, and team t-shirts.

 Company or Sponsor Name _____
 Contact Person & Phone

 Company or Sponsor Address

Coaches: We need coaches to assist the instructor!

 Name _____
 Phone

I hereby give consent for my child to participate in the Boys & Girls Clubs of NWNJ Field Hockey Program. I assume all risk in regard to participation in this and any other Boys & Girls Clubs of NWNJ program in which my child may participate. I release, indemnify and agree to hold harmless the Boys & Girls Clubs of NWNJ, Inc. its directors, officers, coaches, and volunteers from any liability that may result from participation in Boys & Girls Clubs of NWNJ activities.

By my signature, I attest to the following:

- That the above information is correct.
- That in the event of a medical emergency, I authorize the Boys & Girls Clubs of NWNJ to seek emergency medical care for my child as deemed necessary by the Director.

 Signature of Parent or Guardian _____
 Date