



## 2020 Summer Jump Rope Workshop

June 16, 17, 18 at Arlington Elementary School 5814 S. Arlington Ave 46237

Do you like to jump rope? Have fun? Get lots of exercise? Then the sport of Jump Rope is for you! The Indy Air Bears team – based at Arlington Elementary – is offering a summer Jump Rope Workshop! This is open to all boys and girls who have some basic jump rope ability and/or are interested in learning a variety of jumping, tricks and styles. If you are interested in trying out for the team or just want to have some fun this summer, register right away! Space is limited. Jumpers should wear T-shirts, shorts, and athletic shoes.

**WHEN:** AM session 9:00 am to 11:00 am **OR** PM session 6:00 pm to 8:00 pm

**WHERE:** Arlington Elementary Gym – 5814 S. Arlington Avenue 46237

**WHO:** All boys and girls in grades 2 and up

**FEE:** \$40 per person if paid before May 15, \$45 if paid after. Deadline is May 22<sup>nd</sup>

Fee includes a rope to keep and snacks each day!

Questions?? Email us at [indyairbears@aol.com](mailto:indyairbears@aol.com)

Find more INDY AIR BEARS info at [www.indyairbears.org](http://www.indyairbears.org) and [www.facebook.com/indyairbears](https://www.facebook.com/indyairbears)



Circle your choice of session

**SESSION #1**

**SESSION #2**

Name \_\_\_\_\_ School \_\_\_\_\_

Grade \_\_\_\_\_ Parent Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

### PARTICIPANT RELEASE and INDEMNITY AGREEMENT

We (I) hereby request that you accept this application for registration for the Air Bear Workshop for:

\_\_\_\_\_ (Participant name)

In consideration of the acceptance of this application we (I) hereby release all persons associated with Franklin Township Schools and the Air Bears jump rope workshop of and from all claims and causes of action arising from injury as the result of negligence or from some other cause. If medical attention is needed for injury or illness while at the workshop, I give my permission for such medical care and I will be financially responsible. My child has no medical or health related issues that would prohibit him/her from participation in this vigorous workout activity.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Guardian Signature

Please fill out and mail the registration form and fee to : Mrs. Glover, Arlington Elementary School  
5814 S. Arlington Ave. Indianapolis, IN 46237 or deliver to main office at Arlington Elementary.