

## On the Court Basketball X-perience™ Mt. Horeb School

On The Court, LLC Phone: (908) 334-9661 wendy@on-the-court.net

Parent Name				Conserved by	
Player 1 - Name:				Sponsored by:	
Grade: Teacher:					
Player 2 - N	lame:				
(	Grade: Teac	her:			
Address:				Mr. Horeb PTO	
Stree	et:				
City:					
State	State: Zip:		PTO Fundraiser Spring Session		
E-mail:				-	
Telephone (H):				1 <sup>st</sup> to 5 <sup>th</sup>	
Emergency Cell:			Day:	Wednesdays (7 weeks)	
Mail to:	Wendy Manaskie		Dates:	April 2 <sup>nd</sup> thru May 21 <sup>st</sup> ( <i>off: April 16<sup>th</sup>)</i>	
	On The Court, LLC.		Time:	3:30PM - 4:30PM	
	1306 Pinhorn Drive Bridgewater, NJ 0880	7	Cost:	\$200/player	
Please include a check made out to, "On The Court, LLC", for \$200 per child.				Mt. Horeb School 80 Mt. Horeb Road	
Check Amount: \$ Check #:			Warren, NJ 07059		

**ADVISORY:** Please be sure that your child has appropriate indoor sports clothing and sneakers. If your child normally wears any protective gear such as a mouth guard or sports glasses to play sports, please make them available for their use during the activity.

**WAIVER AND RELEASE:** I understand that any child who does not abide by the rules and regulations promulgated by the program is subject to dismissal without reimbursement or recourse.

**LIABILITY WAIVER**: I hereby authorize On The Court, LLC. (OTC) to act for me according to his/her best judgment in any emergency requiring medical attention. I hereby release, discharge and indemnify OTC Staff, affiliated entities and their officers, agents and employees from and against any and all liability or causes of actions arising out of, or in connection with my and/or my child's participation in any program by OTC.

PARENT'S SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

