

On the Court Basketball X-perience™ Warren Central Elementary School **On The Court, LLC** Phone: (908) 334-5075 Fax: (800) 853-6810 wendy@on-the-court.net

Parent Name:		Sponsored by:
Player 1 Name:		
Gra	Grade: Teacher:	
Player 2 Name:		CENTRAL.
Gra	ade: Teacher:	ELEMENTARY
Address:		PTO Fundraiser
Street:	reet:	
City:		<b>Grades:</b> 1 <sup>st</sup> to 5 <sup>th</sup>
	State: Zip:	Day: Wednesdays (8 weeks)
Sla		Date: March 27 <sup>th</sup> to May 22 <sup>nd</sup>
E-mail:		<b>Time:</b> 3:40PM - 4:40PM
Telephone (H):		Cost: \$170 player
Emergency Cell:		Central Elementary School
	MonderManagleia	109 Mt Bethel Road
Mail to:	Wendy Manaskie On The Court, LLC.	Warren, NJ 07059
	1306 Pinhorn Drive	
	Bridgewater, NJ 08807	

Please include a check made out to, "On The Court, LLC", for \$170 per child.

Check Amount: \$\_\_\_\_\_

Check #:\_\_\_\_\_

**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: \_\_\_\_\_

