REC WILL BE FOLLOWING STATE COVID PROTOCOLS IF ANY ARE IN EFFECT

RIDGEFIELD PARK BOARD OF RECREATION BASKETBALL CLINIC 2021-2022 SEASON EARLY BIRD REGISTRATION ONLY UNTIL AUGUST 15

Registration Dates and Locations: Friday, Sept. 24, 2021 6:00 p.m. – 8:00 p.m. Saturday, Sept. 25, 2021 10:00 a.m. – 12:00 p.m.

Civic Center (upstairs) 159 Park Street

Eligibility: Grade 2 ONLY (as of September 2021) who live in or attend school in Ridgefield Park

PLEASE MAKE SURE YOUR CHILD IS IN SECOND GRADE AS OF SEPTEMBER 2021

Checks should be made payable to: RP BOARD OF RECREATION

Early Bird Fee Only: \$50.00 per child; \$40.00 for each additional child **NO REFUNDS ON REGISTRATION FEES! Fee after August 15**: \$55.00 per child; \$45.00 for each additional child **NO REFUNDS ON REGISTRATION FEES! Fee for any registration submitted after Sept. 25 is \$75.00 each. REGISTRATION CLOSES OCTOBER 25.**

MAIL LATE REGISTRATIONS to: Board of Recreation, 234 Main Street, Ridgefield Park.

NO CASH ACCEPTED AT CLERK'S OFFICE!! ALL EARLY BIRD FORMS MUST BE SUBMITTED BY 8/15.

Season: December 2021 - March 2022 Program: 2nd Grade Co-Ed Clinic (Parent must stay with participant – held on Saturdays only) You will receive a letter with the starting date and info on the program.

REGISTRATION FORM - PERI Name:					
Address:		Town:			
Address:School:	Grade (as of Sept.)	:Birth date:			
Phone #:	Email:				
Shirt Size - Please Circle: PLEASE ORDER CAREFULLY, THE SHIRT IS ORDERED FOR EACH PLAYER KEEP IN MIND YOUR CHILD WILL NOT BE WEARING THIS SHIRT UNTIL DECEMBER					
Youth Medium	Youth Large	Youth XL			
Do you have any medical conditions? (Use Back of Form if Needed)					
I/We, parents of the above child named for participation in the above league, hereby give my/our approval. I/We assume all risks and hazards incidental to such participation including transportation, if any. We do hereby waive, release, absolve and agree to hold harmless the Village of Ridgefield Park, members of the Board of Recreation, the organizers, supervisors, and the participants.					
SIGNED: CLEARLY PRINT NAME:					
PLEASE MAKE SURE YOU SIGN FORM, CHILD CANNOT PARTICIPATE WITHOUT SIGNATURE					
I would like to coach orhelp coach. Are you certified?YesNoI cannot coach but am willing to help where needed.					
NAME ON CHECK		CHECK	NO	AMOUNT	

ONLY CERTIFIED COACHES WILL WORK WITH THE PLAYERS

ANY QUESTIONS, CALL (201) 641-4950 ext. 610 or www.ridgefieldpark.org or email: boardofrec@ridgefieldpark.org or emailto: boardofrec@ridgefieldpark.org or

REGISTRATIONS RECEIVED AFTER SEPTEMBER 25, FEE IS \$75 each child – no discounts on late registrations.

THE VILLAGE CHARGES \$25 FEE FOR RETURNED CHECKS

PLEASE TURN OVER AND FILL OUT MANDATORY INSURANCE SECTION

Personal Insurance Information: Name of Insurance Company:_	
Name of Insured:	Policy No.:
Address of Insurance Company:	
Telephone No. of Insurance Company:	(COPY OF CARD MUST BE ATTACHED
List any medical conditions:	-
I am unaware of any medical conditions for participant.	

PLEASE NOTE, YOU MUST FIRST GO THROUGH YOUR PERSONAL INSURANCE COMPANY. THE VILLAGE IS THE SECONDARY INSURANCE. VILLAGE INSURANCE WILL ONLY PICK UP WHAT YOUR PERSONAL INSURANCE DOES NOT FOR SERVICES THAT ARE CUSTOMARY AND REASONABLE (USUALLY DEDUCTIBLE AND/OR CO-PAYS). IF YOU HAVE AN HMO, YOU MUST GO THROUGH YOUR HMO CARRIER. IF NOT, ONLY 50% OF THE BILL WILL BE PAID. INJURY CLAIM FORM MUST BE SUBMITTED TO THE BOARD AND THE INSURANCE COMPANY WITHIN 60 DAYS EVEN IF IT IS JUST NOTIFICATION AND NO BILLS. IT IS YOUR REPONSIBILITY TO PUT THE INSURANCE CARRIER ON NOTICE EVEN IF YOU ARE WAITING FOR DOCTOR BILLS/EXPLANATION OF BENEFITS FROM THE INSURANCE CARRIER.

RIDGEFIELD PARK BOARD OF RECREATION
234 MAIN STREET
RIDGEFIELD PARK, NJ 07660
Voicemail (201) 641-4950 EXT. 610
Info on activities: www.ridgefieldpark.org

nto on activities: www.ridgefieldpark.org.

Email: boardofrec@ridgefieldpark.org

YOU WILL RECEIVE A LETTER IN OCTOBER WITH STARTING DATE AND INFO ON THE PROGRAM.

THERE ARE NO EVALUATIONS FOR CLINIC.