# POTTSGROVE RECREATION

"Building Character from A2Z" 2



#### **COME JOIN US FOR 5-WEEKS OF ACTIVITIES**

~JUNE 28th - JULY 30th \* Monday-Friday \* 9am-12pm~

### ALL ACTIVITIES ARE VIRTUAL

\*ZOOM\* \*CRAFTS\* \*SCIENCE\* \*STORY TIME\* \*GAMES\*

Each REGISTERED child will receive:

Camp T-Shirt, Supply Packets, Zoom Links, & MORE!

**VISIT www.pottsgroverec.com TO REGISTER ONLINE TODAY!** 





#### **Pottsgrove Recreation**

1301 Kauffman Road, Pottstown, PA 19464
Director of Recreation: Pam Ball
director@pottsgroverec.com
484-624-2507
www.pottstownrec.com



This is an independent organization and not affiliated with the Pottsgrove School District.

## Pottsgrove Recreation Board Registration Information

				Child's age	Last Grade Completed
Last Name	First Name				
2nd Child's Name				Child's age	Last Grade Completed
Last Name	First Name				
3rd Child's Name				Child's age	Last Grade Completed
Last Name	First Name				
Address					
Email address				Residency Townsh	nip (circle one) Lower Upper West
Legal Guardian's Names				Но	ome phone
Cell #1			_ Cell #2_		
1st CHILD'S NAME:					
Please indicate shirt size:					
YouthSM	L Adult	S	M	L (Unmarked w	vill be given Youth Large)
2nd CHILD'S NAME:				_	
Please indicate shirt size:					
YouthSM				L (Unmarked w	vill be given Youth Large)
3rd CHILD'S NAME:					
Please indicate shirt size:	1 0 -114	C	0.4	1 /11/2/22 20/22 20	ill be aired Variab Laura
YouthSM	L Adult	3	IVI	L (Unmarked w	ill be given Youth Large)
HOLD HARMLESS AGREEME					
furnish my own insuranc knowledge that the said Agree to indemnify and hold property damage resultir Waive the right to dispute all registration form is recei Agree to allow Pottsgrove Rec	nsibilities of possib e in case of injury. activity could resul- harmless the Pottsg ng from my particip proper charges on- ved creation Board to u	le damage Understand t in damag grove Recre pation in sa ce he/she/	or injury involved and requese or injury the eation Board id activity. They have restored they have actives taken as	st permission to partion particle parti	pation in said activity. I understand I am to cipate in the above activity with the full d agents from liability for personal injury or cipated in the PRB program for which this publications.  Email will not be shared with any other
SIGNATURE:			Da	ate	
	nt has read and agr	ees to Pott	sgrove Recr	eation Board Hold Hai	rmless Agreement. (Parent or guardian sign
for participant under 18)					

Make checks (\$20/child) payable to Pottsgrove Recreation and <u>mail</u> to:

Pottsgrove Recreation

1301 Kauffman Road

Pottstown PA 19464

No forms accepted by the school secretary.