Learn the fundamental use of the bow & arrow. Expert instruction for this target practice activity is provided by The Sleepy Hollow Bowmen.

Eligibility: For youth and adults ages 8 & above.

Time: 9:00AM — 10:00AM (0001-0) 10:00AM — 11:00AM (0001-1) 11:00AM — 12:00PM (0001-2) 12:00PM — 1:00 PM (0001-3) **All sessions are open to all ages 8 and above**

When: Saturdays, April 17 –May 27 - Rain or Shine

Where: A.F.Veteran Park– Snack Bar (Next to the Aquatic Facility)

Cost: $30.00 Resident / $42.00 Non-Resident (6 sessions) Limited to the first 15 registrants

Equipment: Equipment is provided.

For more information call Bob Kaczmarek at (914) 693-8985 ext 153 or e-mail at rkaczmarek@greenburghny.com

Fill out the application form on the back and return to: Greenburgh Parks and Recreation, 11 Olympic Lane, Ardsley, N.Y. 10502
PERMISSION AND RELEASE OF LIABILITY

Please Circle One:

9:00AM — 10:00AM (0001-0)  10:00AM — 11:00AM (0001-1)

11:00AM — 12:00PM (0001-2)  12:00PM — 1:00 PM (0001-3)

**All sessions are open to all ages 8 and above**

PLEASE PRINT

PARTICIPANT’S NAME:________________________________________________________________________

ADDRESS:____________________________________________________________________________________

Street #: ___________________________ City: ___________________________ Zip : __________________

PHONE:__________________________ CELL PHONE:__________________________ GRADE:________

DATE OF BIRTH:____________________ SCHOOL: ________________ Sex: M/F:_____________________

TOWN OF GREENBURGH RELEASE OF LIABILITY

As a participant in the above program, I recognize and acknowledge that there are certain risks of physical injury and I agree to assume the full risks of any injuries, damages or loss which I or my child may sustain as a result of such participation. I further state that I have explained the risk of participating in this sport or event to my child and he/she is still willing to participate. I further understand the Town of Greenburgh does not provide accidental medical coverage and it is my responsibility to provide appropriate coverage. I agree to waive and relinquish all claims and hold harmless the Town of Greenburgh Parks and Recreation Department, and their officials, officers, agents, volunteers and employees from any and all claims, including claims that arise due to negligence of the Town of Greenburgh Parks and Recreation Department, and their officials, officers, agents, employees, and volunteers and the Dad’s Club of Greenburgh, its officers, agents and volunteers.

SIGNATURE OF PARENT/GUARDIAN/ PARTICIPANT:_________________________________________ DATE:__________________

Please list below the name and phone number of someone who may be contacted in case of an emergency.

NAME:_________________________________ PHONE:__________________________ CELL PHONE:________________________

Mail to: Registration Department, Greenburgh Department of Parks & Recreation
11 Olympic Lane, Ardsley, NY 10502.

OL