



Register on September 24 9:00 a.m. - 12:00 p.m. East Rockaway Recreation 17 John Street or call or email 516-341-0996 nlanderer@villageofeastrockaway.org

Basketball



Saturdays

Kindergarten - 5th grade 9:00 - 10:00 a.m.

Track



Saturdays

Kindergarten - 6th grade 10:15:-11:15 a.m.

Saturdays October 1, 8, 15, 22, & 29 November 5, 12, & 19

rain dates are November 26 and December 3

Flag Football

Sundays
Kindergarten - 3rd grade
9:00- 10:00 a.m.
4th-6th grade
10:15:-11:15 a.m.
Sundays
October 2, 9,
16, 23, & 30
November 6,

rain dates are November 27 and December 4

13, & 20



Our programs are professionally instructed by Pioneer Sports. for registration information CALL or EMAIL

516-341-0996 - nlanderer@villageofeastrockaway.org



East Rockaway Recreation



17 John Street, East Rockaway, N.Y. 11518 516 341-0996

Mayor: Bruno F. Romano - Deputy Mayor: Gordon J. Fox Trustees: Rich Bilello - Tim O'Hagan - Jack Felbinger

Program		Fee:			
NAME:		Cell Phone Numbe	er		
ADDRESS:		Cell Phone Numbe TOWN: GRADE:Age:		ZIP:	
DATE OF BIRTH:	GRADE:	Age:	SEX:		
				_	
EMERGENCY CONTACT NAME:				RELATIONSHIP:	
EMERGENCY CONTA	CT PHONE #:				
of Incorporated Village of East any and all liability, loss, dar mental, including death, or fullest extent permissible by participation in said program I acknowledge that, in the nivirus or other health condit In consideration of my child other good and valuable colby, under, or through mysel East Rockaway and all of its action which I or my childre unknown, arising out of or it COVID-19 pandemic, I hereby give consent for the responsibility for the payments.	mages, claims, or actions (include property damage caused by the y law, arising out of his or her part involves rigorous physical action, and that I accept this risk aloren being allowed usage of any insideration, receipt of which is If I do hereby agree to indemnification, or which may here in any way resulting from my an extransportation and treatment ent of any transportation or treatment of the property of the property and treatment of any transportation or treatment in the property and treatment of the property of t	, the parent of	or legal guardian gree to indemnify, roors, employees, volution of any harm, bodilition otherwise incurred by <i>Recreation</i> registed ury and I assume the sing the facility, I or hoose to allow my chapter of recipitation of the property or facility during the property or facility during the property or facility during the property of acquains or companies from the property of the p	elease and hold harmless the: nteers, and/or agents, from and against y Injury including economic, physical, or by above named participant to the ered program/s. I understand his/her erisks. my children could contract a dangerous nildren to use the facility. ring the COVID-19 pandemic and for hildren, and all others who may claim uit, and forever discharge the Village of om any claims, actions, or causes of perty damage, whether known or ockaway property or facility during the illness or injury. I hereby accept med participant is in good physical	
	al or physical conditions that we my signature below represent:				
-					

Drop-off registration:

Forms and payment (check only) may be placed into our <u>Locked box</u> located at the entrance of the East Rockaway Recreation building, 17 John Street, East Rockaway, NY 11518

Refund Policy:

A full or partial refund will be issued for any program canceled by the East Rockaway Recreation department

Refunds due to illness or accident will be reviewed and must be submitted in writing and accompanied by a Doctor's Note.

Covid-19 Closures will be credited (no refunds)