## **Bridges Homeschool Collaborative**

## **Physical Education**

**What:** The class will focus on increasing endurance, strength, flexibility, cardio, and body composition while playing games and learning about personal fitness. Activities may include soccer, relay races, circuit course, kickball, volleyball, basketball, softball, and ultimate frisbee, with an emphasis on learning the proper rules and playing as a team. Along the way, we will learn to recognize health-related problems that are associated with the improper use of exercise.

Where: First Friends Church ~ gym/fields/E111

When: Mondays, January 21, 2019 - May 6, 2019 Class A: 12:30-1:30 (ages 5-10) (Meet in the gym) Class B: 1:45-2:45 (ages 10-18) (Meet in room E111) (If your child is 10, you may choose either class A or B.)

## Other info:

Email: <u>cantonbridges@gmail.com</u> Website: cantonbridges.com Cost: \$105 (15 weeks = \$7 per class) Teacher: Erica Fill

**Bridges P.E. Registration** 

Children that are participating:

1	Age:	Circle One:	Class A	Class B	
2 Class B	Age:	Circ	le One:	Class A	
3 Class B	Age:	Circ	le One:	Class A	
4 Class B	Age:	Circ	le One:	Class A	
5 Class B	Age:	Circ	le One:	Class A	
6 Class B	Age:	Circ	le One:	Class A	
Mother's Name: Phone: E-Mail: (Please Print Clearly)					
Father's Name:	Phone:				
E-Mail:(Please Print Clearly)					
Total number of children participating:x \$105 =					
Please make checks payable to Bridges and tu	rn it in one of the fo	llowing way	/S:		
Mail your payment, activity release and registra	tion to:				
Kris Crock 3858 Falcon Chase St NW Uniontown OH 44685					

## Deliver it to the Bridges Hallway (C.E. Wing) on Mondays from 8:30-2:45 at First Friends. Bridges Physical Activity Release of Liability Form

I, \_\_\_\_\_\_, hereby acknowledge my awareness of my child's (children's) participation in Bridges Physical Education class and that such activities may involve the following:

Soccer, relay races, circuit course, kickball, volleyball, basketball, softball, and ultimate frisbee, and various team games.

I have been informed and understand that my child's (children's) participation in these activities may expose my child (children) to certain risk of physical injury.

I knowingly, freely, and voluntarily assume all risks and engage my child (children) in the participation of the above mentioned activities.

I hereby release Bridges from any and all liability arising out my child's (children's) participation of the above mentioned activities and hereby waive my rights herein to assert any claim(s) for damages, or bodily injury to the fullest extent allowed by law.

I further agree that I will hold Bridges harmless against any and all claim(s) for damages, or bodily injury arising out of or in connection to my child's (children's) participation in the above mentioned activities.

I fully understand the terms set forth in this form, and I hereby execute this Physical Activity Release of Liability Form.

Signature of Parent or Guardian	_ Date
Signature of participant	Date
Signature of participant	Date
Signature of participant	Date
Signature of participant	Date