

**PORTLAND PARK & RECREATION**  
 265 MAIN STREET PO BOX 71 PORTLAND CT 06480  
 (860)-342-6757 FAX: (860)-342-6763



**PRE-SEASON YOUTH BASKETBALL CLINICS**

Great chance to get ready for the season!!! The Parks and Recreation Department will be hosting a series of pre-season drills and clinics during the fall to help prepare youth in grades 1 – 8 for the up and coming Basketball Season. **Fee: \$15 for the program**

<b>Gender/Grades</b>	<b>Site</b>	<b>Day</b>	<b>Dates</b>	<b>Time</b>
Girls 5 - 6	Portland Middle School	Wednesdays	Oct 4, 11, 18	5:00 – 6:00 pm
Boys 5 – 6	Portland Middle School	Wednesdays	Oct 4, 11, 18	6:00 – 7:00 pm
Girls 7 - 8	Portland Middle School	Wednesdays	Oct 4, 11, 18	7:00 – 8:00 pm
Boys 7 – 8	Portland Middle School	Wednesdays	Oct 4, 11, 18	8:00 – 9:00 pm
Girls 3 & 4	Gildersleeve School	Thursdays	Nov. 2, 9, 16	5:30 – 6:30 pm
Boys 3 & 4	Gildersleeve School	Thursdays	Nov. 2, 9, 16	6:30 – 7:30 pm
Girls 1 & 2	Valley View School	Thursdays	Dec. 7, 14, 21	5:00 - 5:45pm
Boys 1 & 2	Valley View School	Thursdays	Dec. 7, 14, 21	6:00 - 6:45pm

**PORTLAND’S “COME ON OVER” 5K ROAD RACE**

**THE ZOMBIE RUN/WALK**

- Date:** Saturday, October 14, 2016, Rain or Shine
- Time:** Race starts 9:00 am (registration starts at 7:30 am)
- Place:** Start and Finish at Portland Town Riverfront Park, Brownstone Avenue  
 (Directions, road race course map, entry form, results, race photos and additional information can be found on the Portland web site, [Portlandct.org](http://Portlandct.org) under the Parks and Recreation Link)
- Entry Fee:** \$15 per runner prior to October 6, 2017  
 \$20 per runner after October 6, 2017  
 \$10 for any Portland residents 19 and under thru day of race  
 \$10 for walkers division – the course will be 2.1 miles.

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Po Box 71, 265 Main Street, Portland, CT 06480 Phone: 342-6757 Fax: 342-6763  
Hotline: 860-262-7234

[www.portlandct.org](http://www.portlandct.org)

Participant's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Street Address \_\_\_\_\_ Apt. # \_\_\_\_\_ Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Male: \_\_\_ Female: \_\_\_ Date of Birth \_\_\_\_\_ School Grade: \_\_\_\_\_

**Under 18 years old, please fill in parent information**

Mother's Name \_\_\_\_\_ Father's Name \_\_\_\_\_

Home Number \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Mom's Work Phone: \_\_\_\_\_ Dad's Work Phone: \_\_\_\_\_

Mom's Cell Phone: \_\_\_\_\_ Dad's Cell Phone: \_\_\_\_\_

If a parent is not available:

**Emergency Contact:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Home Phone #** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_ **Cell Phone #** \_\_\_\_\_

Child's Physician: \_\_\_\_\_ Phone #: \_\_\_\_\_

\* If there are any medical concerns or allergies that we should be aware of, please list below:

\_\_\_\_\_

**In case of an emergency, may we transport via ambulance? Please circle: Yes No**

Please list anyone who does not have permission to pick up your child (If this is a biological parent, a copy of the court order must accompany this form). \_\_\_\_\_

I give the Portland Parks and Recreation Dept. permission to use any photographs taken during the program to be used in any advertising, i.e. web site, program literature: Yes No

	<u>Program(s)</u>	<u>Date &amp; Time</u>	<u>Fee</u>
1.	_____	_____	_____
2.	_____	_____	_____

TOTAL: \_\_\_\_\_

I hereby agree to hold harmless the Town of Portland and its agents for any accidental injury caused by participation in any Town of Portland sponsored activities. In signing this form, it is understood that Portland Parks and Recreation Department and the Town of Portland DO NOT assume responsibility for accidents and the participant(s) agree(s) to abide by all rules and regulations set by the Portland Parks and Recreation Department.

If under the age of 18 years old, please have parent or guardian sign;

Participant: \_\_\_\_\_  
(Print Name) (Signature) (Date)

