

BARRINGTON RECREATION DEPARTMENT

281 County Road Barrington, RI (401) 247-1925

Office Hours: 9am-12pm Monday-Friday

FEBRUARY VACATION PROGRAM

February 15-19

Registration Deadline: February 11th

Register by Mail or in person at the Recreation Office Monday – Friday 9 – 12 PM

Drop off registrations in the Recreation Mailboxes at the Town Hall or Library

Cost: \$10 per activity per person

*All activities are based on enrollment and can be cancelled if sufficient enrollment is not reached

All events take place in the Barrington Middle School Gymnasium

MONDAY, FEBRUARY 15

9am – 12pm Floor Hockey Ages 7 -10 *

1pm – 3pm Basketball / games Ages 11 – 16



*Must have protective wear such as mouth pieces, eyewear, helmet;
Please bring own plastic-bladed hockey stick

TUESDAY, FEBRUARY 16

9am – 12pm Floor Hockey Ages 11- 16*

1pm – 3pm Kickball Ages 7 -10



* Must have protective wear such as mouth pieces, eyewear, helmet; Please bring own plastic-bladed hockey stick

WEDNESDAY, FEBRUARY 17

9am – 12pm Knock Hockey Tournament Ages 7 -10

9am – 12pm Volleyball Ages 11 – 16



FRIDAY FEBRUARY 19th, 9:30am SKATING WITH BROWN BEAR MASCOT! THIS EVENT IS WEATHER AND ICE PERMITTING, CALL OUR OFFICE THE DAY OF THE EVENT FOR DETAILS ON OUR ANSWERING MACHINE. PASSES FOR DUDEK BOWLING AND UNITED SKATES ARE ALSO AVAILABLE

Barrington Recreation Department
281 County Road, Barrington – (401) 247-1925

Child's Name: _____

Address: _____

Home Phone: _____ Age: _____

Allergies/Medical Conditions/Medications: _____

Parent's Name: _____ Home phone: _____

Cell phone: _____

Work phone: _____

Parent's Name: _____ Home phone: _____

Cell phone: _____

Work phone: _____

I am registering my child for the following program(s), please check activity:

Mon, February 15	√	Tue, February 16	√	Wed, February 17	√
9am-12pm Floor Hockey ages 7-10		9am-12pm Floor Hockey ages 11-16		9am-12pm Knock Hockey Tourney ages 7-10	
1-3pm Basketball ages 11-16		1-3pm Kickball ages 7-10		9am-12pm Volleyball ages 11-16	

I, the parents / guardian of the above child, hereby give my approval for his/her participation in any/all activities during the Barrington Recreation Department's 2010 February Vacation Programs. I assume all risks and hazards incidental to such participation, including transportation to and from such activities, and hereby waive, release, absolve, indemnify, and agree to hold harmless all individuals responsible for the conduct or activity involving my child. Also, I understand that registrations for children requiring special attention are reviewed on a case-by-case basis with the Recreation and activity directors. I understand that the Recreation Department Staff does not receive specialized training for various special needs, but will work with individuals as appropriate. I will provide as much detail as possible, including any physical/emotional needs or medications involved so that the staff will be able to provide a positive experience for each child.

Signature (Parent / Guardian) _____

AMOUNT PAID _____ **CHECK #** _____ **CASH** _____ **receipt #** _____

Please return to Recreation Department Office or our mailbox at the Town Hall
Please make checks payable to "Town of Barrington"