



## REGISTRATION FORM

ONLINE REGISTRATION IS PREFERRED- [WWW.COLCHESTERCT.GOV](http://WWW.COLCHESTERCT.GOV)

*NO registration will be complete without payment!*

Participant's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Current Grade \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Parent's/Guardian's Name: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address (to receive receipt of registration): \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Please list any allergies, medications, or previous conditions which we/instructor should be aware of (i.e. ADD, ADHD, Hearing impaired, visually impaired, Special Ed, Allergies i.e., Nuts, Dairy, Bee Stings, Latex, EPI PEN use, etc.)  
\_\_\_\_\_

Does participant need an accommodation due to a disability to enjoy this activity? Yes \_\_\_\_ No \_\_\_\_  
If yes, you will be contacted for more information.

Would you like the email address listed above to receive Parks & Recreation announcements? Yes \_\_\_\_ No \_\_\_\_

### ASSUMPTION OF LIABILITY

Participation in the activity may involve risk of injury. As a parent, guardian or participant, I am aware of these hazards and my ability to participate. I hereby agree to release, discharge and hold harmless the Town of Colchester, its employees, contracted instructors and volunteers from the liabilities which may occur while participating in the activity. I understand that participation in any recreational or sporting activity involves risk. I further understand that the Town of Colchester does not provide accident/medical insurance for program participants. In addition, I give permission for the participant to be treated by qualified medical personnel in the event that the above named parent/guardian cannot be reached at the phone numbers provided.

Signature (Parent/Guardian if participant is under age 18): \_\_\_\_\_ Date: \_\_\_\_\_

**Register online at [www.colchesterct.gov](http://www.colchesterct.gov)**

**PAYMENT (DO NOT MAIL CASH): Online- credit card; Mail- check; In Person- cash, check or credit card**

Check # \_\_\_\_\_ Make checks payable to: **Town of Colchester**

Credit Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_ CCV # \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Participant Name	Sex	Date of Birth	Grade	Activity #	Cost	Activity Name
					\$	
					\$	
					\$	
<b>Please send this form to:</b> <b>Colchester Recreation</b> <b>127 Norwich Avenue</b> <b>Colchester, CT 06415</b>					\$	<b>Non-Resident Fee \$20 per class</b>
					\$	<b>Scholarship Fund Donation</b>
					\$	<b>Total Due</b>

**Register online at [www.colchesterct.gov](http://www.colchesterct.gov)**

**Colchester's 3rd Annual Town Wide Tag Sale**  
**August 1, 2020 (Rain Date August 8, 2020)**  
**Sponsored by COLCHESTER RECREATION**

**How it works:**

You purchase your place on the map for \$25

Hold your tag sale at your house (or get together with neighbors) on July 19, 2020.

Maps will be available July 24, 2020 at [www.colchesterct.gov/recreation-department](http://www.colchesterct.gov/recreation-department)

Anyone can print out the map and visit all of the tag sales in Colchester on August 1, 2020

One full day of great deals!

**All forms and fees are due no later than JULY 19, 2020**

You can mail this form and \$25 fee to: 127 Norwich Ave., Colchester, CT 06415

Checks should be made out to: Town of Colchester

QUESTIONS? CALL Colchester Recreation at (860) 537-7297

**So we may contact you with any questions:**

Your Name:

Your phone number:

Your email:

**So we list your tag sale correctly:**

**Address of the TAG SALE:**

**Hours of the TAG SALE:**

**If it rains, will you hold your tagsale on the rain date of Aug. 8, 2020?**

I understand that by enrolling in the "Town Wide Tag Sale", my address will be made public on a map listing all local tag sales on August 1, 2020. Colchester Recreation will not be held liable for any events arising from the listing of my personal information.

Signature

Date



The largest soccer  
camp company in  
North America.

## CAMP IS STILL OPEN!!

### Colchester P&R

For more information contact Johnny Vieira

[johnnyv@challengersports.com](mailto:johnnyv@challengersports.com) 401.213.3162 ext 328

*We are excited to announce that the Challenger Sports Soccer Camp will still be operating this coming summer 2020! We have worked with health departments and officials to ensure the safety of our staff and campers. Although there will be a different feel to camp in 2020, like previous years, the players will still leave with smiles and a huge amount of love for the game of soccer!*

**July 27th - 31st @ RecPlex 215 Old Hebron Rd.  
Colchester, CT 06415**

Half Day	Ages 6-10	9:00am - 12:00pm	\$159
Full Day	Ages 8-16	9:00am - 4:00pm	\$209

#### HOST FAMILIES

Host families are an integral part of the camp week with the opportunity for extra soccer in the backyard, as well as the unique experience of learning about another culture and creating friendships for life.

Each Host Family will receive a rebate per coach, per week and an opportunity of a lifetime.

#### HEALTH & SAFETY

Social distancing will be enforced; players must maintain a distance of at least six feet apart throughout each session.

There will be no physical interaction between players or coaches at any time (This may vary according to local health guidelines).

Each individual will have a personal playing area to work in and a designated spot for their belongings; each of which will be at least six feet away from other participants

Equipment will be sanitized before and after each session.

Masks are not mandatory for participants but are highly recommended.

Coaches will wear masks when needed during practices but will maintain social distancing guidelines during each practice.

For a FULL list of Health and Safety Guidelines please see the registration link at;



**FREE JERSEY.** To receive your free jersey, register online 30 days prior to your camp (A \$34.95 value!). S&H fees apply.

# CHALLENGER

SPORTS™



Use the QR code and scan straight to the link for registration!

\*Open your phone camera and touch the barcode to be redirected

**CHALLENGER**  
SPORTS™

CAMPS™

TEAMWEAR™

ACADEMY™

VIRTUAL™

[CHALLENGERSPORTS.COM](http://CHALLENGERSPORTS.COM)

/ REGISTER ONLINE



# WINS For Life

## Youth Basketball Clinics

### WINS for Life clinics promote:

- \* Fun Learning, Lotsa Smiles
- \* Self-esteem, Confidence
- \* Communication skills
- \* Sportsmanship, Teamwork
- \* Inclusion, Diversity
- \* Healthy interactions
- \* Competitive spirit, desire, effort



### WINS for Life clinics provide:

- \* Outstanding instruction
- \* Experienced coaches
- \* Enthusiasm, praise, support
- \* Individual skills & team concept
- \* Unique drills, improved ability
- \* Fun Games & Competitions
- \* Basketball knowledge



## "Summer Basketball in the Park"

Hosted by Colchester Rec. Dept.

Presented by WINS For Life



**August 3 - August 6 (6:00-7:30pm), Grades 4-7 (boys & girls)**

*Four fun evenings of high-level skills, drills & thrills*

- \* **Site:** Rec. Plex, 215 Old Hebron Road, Colchester, CT
- \* **Reg. Fee:** \$90 \* **Rain date:** Friday, Aug. 7 \* **Maximum students:** 16
- \* **More Info:** wins4life.com, colchesterct.gov/recreation-department

WINS For Life has been hosting clinics at the Basketball Hall of Fame since 2010. They now come to Colchester with hoops of positive energy and high-level instruction! WINS elevates the skill level of youth players while contributing to their self-esteem and confidence. Students at WINS For Life clinics will improve their basketball skills & learn important life lessons. Individual attention, encouragement, and instruction are at a premium. These clinics cover basic and advanced fundamentals, ball-handling, passing, shooting, cutting, one on one moves, and more! A fun learning opportunity featuring games & contests to reinforce the lessons taught!

\* **Participation Requirements:** Per our response to COVID-19, our heightened safety and precautionary measures include that all participants are required to bring: a basketball, a mask, hand-sanitizer, and plastic bottle beverages. Students will wear masks only when / if needed, but not during physical activities.

**Contact:** David Vasquenza, **Office:** 860-645-1934 **Fax:** 860-643-5172 **Email:** wins4life@cox.net

### **\*\* WINS For Life "Basketball in the Park" (Colchester) Registration Form \*\***

**Mail checks & form payable to: WINS For Life, P.O. Box 8396, Manchester, CT. 06042-8396**

**Contact:** David Vasquenza, **Office:** (860) 645-1934 **Email:** wins4life@cox.net

Name: \_\_\_\_\_ Address: \_\_\_\_\_ School: \_\_\_\_\_

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_ Male: \_\_\_\_ Female: \_\_\_\_ Grade (2020-21): \_\_\_\_ student email: \_\_\_\_\_

Mother: \_\_\_\_\_ email: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Father: \_\_\_\_\_ email: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Doctor name & phone: \_\_\_\_\_ \*Parent signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*For Allergies or other medical conditions, please attach a note to this form.** \*Parental signature (above) is required to enroll the student.

**\*With signature, I agree to all of the following:** I understand basketball has risk of personal injury. As parent/guardian to participating student, I agree to full responsibility (as does the student) for the personal health and safety of the student. I accept responsibility for all financial liabilities. The student is in good physical and mental condition, and does not have a condition that could be aggravated by participation, nor has a medical condition that could place others in harm's way. I agree to allow immediate medical care, if needed.

I do acknowledge the contagious nature of COVID-19. I voluntarily assume & accept the risk that my child (the participant) may have increased exposure to this virus. I agree to waive, release, and hold harmless WINS For Life and the Town of Colchester of any and all physical, medical, health and property incidents, including waiver of the staff and other participants. Each student is responsible for personal property. Photos and video of students in WINS activities may be taken by WINS staff only. If reimbursement is necessary and approved by WINS For Life, a service fee will be assessed (checks: \$5, credit cards: \$12).