

## Hot Shots Sports – Fall 2019



### St. John's Lutheran School

**Hot Shots Sports** aims to develop young athletes who will grow emotionally, physically, and intellectually in our sports programs. By redirecting the focus away from wins and losses and toward personal growth, we create an environment where winning is the byproduct of and not the means to success. This approach creates critical thinkers who understand the importance of giving their best in practice, games, and other life endeavors. Our Coaches take pride in fostering that drive, and motivating your child to find the champion inside of themselves.

**Sports Enrichment:** The Sports Enrichment program incorporates movement, sports and imaginative play to create a perfect environment to enhance the child's physical, mental, emotional and social development. Each week the group will play sports such Basketball, Soccer, Floor Hockey and Flag Football. Players will be introduced to basic skills and strategies of each sport through drills, and also experience exciting scrimmage games. This program challenges children to develop new skills, learn social abilities through taking turns and following instructions from the coaches.

**Dates:** Thursday; November 14, 21 and December 5, 12

**Time:** 2:30 – 3:30pm

**Grades:** 3 Year Old & 4 Year Old Preschool

**Min/Max:** 8/18

**Fee:** \$40.00 – Please make checks payable out to 'Hot Shots Sports'

Submit cash/check to School office with signed waiver (on reverse side)  
Contact **Jessica Lynch** with any questions! [Jessica@hotshots4kids.com](mailto:Jessica@hotshots4kids.com) (630) 207-3292

**NOTE:** All registering students must have a Hot Shots Sports standard waiver signed by a parent or legal guardian prior to participating in class.

**Children must be picked up promptly at the end of class. Any child not picked up by 3:35pm will be sent to Extended Care at parents' expense.**

**Registration form, signed waiver and payment**

**are due by Monday, November 11 , 2019**

.....**To participate please complete the form below.....**

**Consent and Waiver**

I hereby release Hot Shots Sports LLC, their employees and agents from all liability from any injury or illness that may result from my child's participation in the program. I certify that my child is in good physical health and can participate in all activities. In the event that I cannot be reached in a medical emergency, I hereby grant permission to the employees of Hot Shots Sports LLC to act on my behalf.

Student: \_\_\_\_\_ Grade: \_\_\_\_\_

Student: \_\_\_\_\_ Grade: \_\_\_\_\_

Student: \_\_\_\_\_ Grade: \_\_\_\_\_

Student(s) will be:      picked up \_\_\_\_\_      go to Extended Care: \_\_\_\_\_

Number of students attending: \_\_\_\_\_ X \$40.00 = \$ \_\_\_\_\_ enclosed

Parent/Guardian: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Return form with payment or online receipt and signed waiver to your child's teacher by  
Monday, November 11, 2019.**