



Department of Parks & Recreation – Recreation Division  
101 Field Point Road, Greenwich, CT 06836-2540  
Phone: 203-618-7649 Email: [Recreation@greenwichct.org](mailto:Recreation@greenwichct.org)



## 2019 Indoor Pickleball – Spring

Eastern Greenwich Civic Center, 90 Harding Road, Old Greenwich

**ACTIVITY NUMBER:** 11203

**DESCRIPTION:** Indoor pickleball for adults on 3 regulation sized courts at the Eastern Greenwich Civic Center in Old Greenwich. **Pre-registration** is a **one-time fee**. Register for one or two days at a discounted rate. Players that prefer to drop-in must sign-in each time and pay the daily drop-in rate. Space may be limited at each session. NOTE: *This is NOT an instructional program.*

### REGISTRATION DATES:

- **Online: Monday, January 28** - online registration is only available to Greenwich residents. To register online go to [www.greentichct.gov/webtrac](http://www.greentichct.gov/webtrac) and select "Activity Registration."
- **Mail-in: Monday, February 11** - application should not be postmarked earlier than February 11.
- **In-person: Monday, February 25** at the Parks and Recreation Office. Non-residents may sign-up starting Monday, February 25. Space is limited and registration is first come, first serve.

**Greenwich residents are required to provide proof of residency once per calendar year for all Parks and Recreation programs.**

The primary family member is required to provide two current proofs of Greenwich residency. Family members participating in this program who are over 25 years of age require one current proof of Greenwich residency.

Acceptable proof documents with resident name, date and Greenwich address are as follows: Residential Lease; Utility bill (Gas, Electric, Water, Oil); Cable, Telephone, or Internet bill (not cell phone); Credit Card or Bank Statement (No Mortgage Statement); Driver's License or DMV CT State ID.

Family members participating in this program who are under 25 years of age, require a copy of their birth certificate, passport, or guardianship on file.

**For non-residents, the primary family member as well as all participating family members who are over 25 years of age must provide identification and proof of address. Non-resident participants under 25 years of age, require a copy of birth certificate, passport or guardianship.**

**LOCATION:** Eastern Greenwich Civic Center, 90 Harding Road, Old Greenwich

SECTION	CATEGORY	DATES
P1	Tuesdays: 5:30 p.m. – 8:00 p.m.	April: 2, 9, 16, 23 May: 7, 21, 28, June: 4, 11 & 18 <b>No pickleball April 30 or May 14</b>
P2	Thursdays: 5:30 p.m. – 8:00 p.m.	April: 4, 11, 18, May: 9, 23, 30, June: 6, 13, 20, & 27 <b>No pickleball April 25, May 2, or May 16</b>



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**FEES:**

**(Multi-day and senior discounts applied)**

1 day per week	\$44.00; \$33.00 for Greenwich seniors with park pass
2 days per week	\$66.00; \$49.50 for Greenwich seniors with park pass

**\*Drop-in fee:** \$5.00, cash only & exact change accepted. Drop-in fee cannot be applied towards the season rate.

We accept Visa, MasterCard, American Express, and Discover credit cards at the Town Hall Parks and Recreation Office & for online registration. **There are no refunds and we do not pro-rate fees. Requests for credit will only be considered if received in writing prior to the start of the program. There is a \$15.00 administrative fee for credits and a \$25.00 fee for any returned checks.**

**COMMENTS:**

- Players must wear sneakers while on the courts.
- Nets and balls are provided. Racquets are limited; It is recommended to bring your own.
- Weather and program updates will be available on our Recreation Sports website at: [www.teamsideline.com/greenwichct](http://www.teamsideline.com/greenwichct). In addition, you can call the weather hotline at 203-861-6100.
- Make checks payable to: **Town of Greenwich**.
- If mailing application, please cut along the dotted line and include the below form with payment to:

Adult Pickleball  
Department of Parks and Recreation  
P.O. Box 2540  
Greenwich, CT 06836-2540

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Please complete full name, phone, and e-mail below:

Last Name		First Name
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Home Phone	Cell Phone	E-mail
<hr/>		

Indicate preference: days of week and time to play:

Day	Time	Place check in box below to select
Tuesdays	5:30 p.m. – 8:00 p.m.	
Thursdays	5:30 p.m. – 8:00 p.m.	

**\*PROGRAM REGISTRATION & INDEMNIFICATION & RELEASE (NEXT PAGE) MUST ALSO BE SUBMITTED\***



# Program Registration (please print)

Program Name \_\_\_\_\_ Activity # \_\_\_\_\_ Section # \_\_\_\_\_

Participant's Name \_\_\_\_\_ Gender (M/F) \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_ Zip Code \_\_\_\_\_

Birth Date \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

Specific Program Information:

\_\_\_\_\_

Parent/Guardian \_\_\_\_\_ E-mail \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell \_\_\_\_\_

***In case of emergency notify the following:***

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship: \_\_\_\_\_

List Physical Restriction(s):

\_\_\_\_\_

## INDEMNIFICATION AND RELEASE

**THIS IS A LEGALLY BINDING DOCUMENT. DO NOT SIGN IT UNTIL YOU HAVE READ THE CONTENTS HEREOF AND UNDERSTAND THE SAME. IF YOU ARE IN DOUBT, CONSULT AN ATTORNEY PRIOR TO SIGNING THIS DOCUMENT.**

The Undersigned (hereinafter referring to myself, my minor children or charges, my heirs and assigns) hereby agree(s) to assume all risk and bear all responsibility and to indemnify and hold the TOWN OF GREENWICH, its agents, representatives, servants, officers, and employees, harmless from and against any and all claims, demands, suits, proceedings, liabilities, judgments, awards, losses, damages arising out of injuries to any persons or property, including any and all costs and expenses incurred in the defense of such claims, demands, suits and proceedings including court costs and attorneys' fees resulting from, arising out of, or in any way related to or connected with my/our participation in the \_\_\_\_\_ program sponsored by the Town of Greenwich/use of Town of Greenwich property/facilities/apparatus or equipment thereof.

The Undersigned, does forever discharge the Town of Greenwich, its agents, representatives, servants, officers and employees from any and all claims including claims of negligence or carelessness, alleging damages and any and all causes of action which the Undersigned may have or may hereafter have, arising out of, related to, or in any manner connected with injuries or damages the Undersigned may sustain by reason of my participation in the above-described program or use of the Town of Greenwich property, facilities, apparatus or equipment.

The Undersigned, the participant or parent/guardian of the above named person, who participates in programs organized by the Town of Greenwich Department of Parks and Recreation, assumes all risks and hazards incidental to the conduct of the activity and transportation to and from the activity. I am aware that participating in any recreational program can be a dangerous activity involving many risks of injury. I further understand there is inherent risk associated with the(se) activity (ies) and authorize emergency medical treatment and transportation in my absence.

Dated at Greenwich, Connecticut, this \_\_\_\_\_ day of \_\_\_\_\_ 201\_\_\_\_\_

Signature of Participant or Parent or Guardian for participants under 18 years of age:

\_\_\_\_\_

HH# \_\_\_\_\_ Check# \_\_\_\_\_ Receipt# \_\_\_\_\_ Proof \_\_\_\_\_ Initials \_\_\_\_\_