



Kids Run Long Island Presents:
Go Girl!
Strong Body Strong Mind
 A Fun Fitness Program for Girls – 1st to 5th grade



Choose One: (You must circle one)

A. Common Grounds Sayville 6:30pm to 8pm
 Dates: Tues. - 7/9, 7/16, 7/23, 7/30, 8/6, 8/13

B. Foster Park Sayville 6:30pm to 8pm
 Dates: Thurs.- 7/11, 7/18, 7/25, 8/1, 8/8, 8/15

C. TBA- Park in Sayville 10am to 11:30am
 Dates: Saturday- 7/13, 7/20, 7/27, 8/3, 8/10, 8/17



Program Details:

A fun fitness class for girls FOR GRADES 1ST THROUGH 5TH grade. Class includes run/walk segment, yoga segment and mindfulness segment. Lessons on healthy eating, building self-confidence and developing tools to reduce stress will be part of the curriculum. Program is 6 sessions, 1.5 hours long. Fee \$110.00 (limited time). More information at www.kidsrunlongisland.org

SPACE IS LIMITED. FIRST COME FIRST SERVE. ONCE CLASS IS FILLED TO 24 GIRLS, CLASS IS CLOSED.

******* REGISTER ONLINE AT www.kidsrunlongisland.org *******

Or register by mail ASAP. Make checks payable to Kids Run Long Island and mail to Kids Run Long Island, 77 Indian Head Dr., Sayville NY 11782.

ENTRY, RELEASE & WAIVER OF LIABILITY FORM Go Girl!- SAYVILLE 2019

Please read all statements below and sign where indicated as acknowledgment that you understand and will comply with each statement.

I, as the parent/guardian of said child, know that exercising can be a potentially hazardous activity. I have been informed that it is strongly recommended that I have my child see a physician before my child participates in this program. I attest and verify that my child is physically fit and has sufficiently trained to complete this program & my child's physical condition can be verified by a licensed medical doctor. I assume all risks associated with this program including but not limited to: falls, contact with other participants, the effects of weather, including high heat and /or humidity, dehydration, traffic, and the conditions of the road/park grounds, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting this minor child's entry, I, for myself and the child I am the parent/guardian for, and anyone entitled to act on my behalf, waive and release Kids Run Long Island Inc. and Town of Islip, their commissioners, their agents, servants, sponsors, business sponsors, employees and volunteers, directors, Board of Directors, Officers, their representatives and successors from all claims and liabilities of any kind arising out of this minor child's participation in this program. I grant permission to all of the foregoing to use any photographs for any legitimate purpose. I acknowledge that fees are non refundable for any reason and that my right to participate in this program is non transferable. I understand and acknowledge the above statements and risks for the minor child as parent/guardian.

I HAVE READ THIS AGREEMENT, fully understand its terms, understand that I have GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

Name of child: _____ Address: _____

Parent/guardian Cell Phone: _____ Parent's email (please print neatly): _____
 Grade of Child in Fall of 2019 _____

Total amount enclosed: _____ (Fee is \$110.00 per child) \$5 off per child IF SIBLINGS REGISTER TOGETHER

Parent/guardian Signature: _____ (acknowledged and signed for minor child) Date: _____

Parent or guardian's Name (print) _____

CONTACT INFO:

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