



2019-2020 Season

REGISTRATION FORM
Adult Open Gym Basketball Program
Sponsored by Woodstock Recreation Committee

MONDAY EVENINGS September 16th – June 8th
7-9PM (8:30-10:30PM from January to March)

***(GYM CLOSED AND NO BASKETBALL WHEN NO SCHOOL)**

***(If Monday is a holiday or half day, we will meet to play on Wednesday. Please note the following dates: 10/14, 11/11, 2/17, 5/25)**

LOCATION: WOODSTOCK MIDDLE SCHOOL GYM

Name _____ D.O.B. _____

Emergency Phone # (____) _____

E-mail Address _____

Forms must be returned to: **Woodstock Recreation Committee** and submit to:

- WRC, 415 Route 169, Woodstock, CT 06281

Disclaimer: I, _____ will not hold the Woodstock Recreation Committee, including its representatives of the Town of Woodstock, nor the Town of Woodstock, including its representatives, liable for any injury sustained by me while participating in the Adult Open Gym Recreational Basketball Program sponsored by the Woodstock Recreation Committee.

SIGNATURE _____ DATE _____

Printed Name _____



Participants must be 18 years or older to participate in this program.