

HILLSIDE RECREATION FALL ACTIVITIES MUST BE HILLSIDE RESIDENT

SEPTEMBER 1ST THROUGH SEPTEMBER 29TH

**SELECT ALL PROGRAMS THAT APPLY, FILL OUT FORM BELOW - Bring: I.D.
AND 1040 form and check or money order (no cash)**

ALL STAR CHEERLEADING (*Tryouts required) \$50 _____

**BOYS TRAVEL BASKETBALL LEAGUE (AGES 9-12YRS) (*Tryouts required)
\$50 _____**

CO-ED SOCCER LEAGUES (AGES 6-13) \$35 _____

FREE: ADULT ZUMBA _____ FREE: ADULT LINE DANCING _____

APPLICATION FORMS

I/WE, THE PARENTS OF _____, GRANT PERMISSION FOR
OUR CHILD

TO PARTICIPATE IN _____ PROGRAM. WE ASSUME
ALL

RESPONSIBILITY FOR INJURIES WHICH MAY OCCUR.

ADDRESS: _____ SEX: M _____ F _____

AGE: _____

DATE OF BIRTH: _____ GRADE: _____ PHONE: _____

E-MAIL ADDRESS: _____

MEDICAL PROBLEMS: _____

PARENTS SIGNATURE _____