## JL SORENSON RECREATION CENTER



## **OFF-TRACK SUPER SPORT**

D Track

<u>Drop-off/Pick-up Procedure</u> At 10:45 participants may be signed in at the Uintah Room. Parent or designated adult is required to come into the building to sign-in participants. NO CURBSIDE DROP-OFFS. Parent/designated adult is required to come in to the building to sign-out participants at 2:30 NO CURBSIDE PICK-UPS. Participants will not be allowed to leave the building on their own. We apologize for any inconvenience. These sign-in/sign-out measures are designed for the safety of participants. There will be no early drop-off. Counselors will not be here until the scheduled start time. For Every 15 min. a parent is late \$5 dollars



## **ACTIVITY CALENDAR**



## \*Activities Subject to Change Without Notice

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	
October 16	17	18	19	20	
Battleships Scooter Games Lord of the flies Tag Swimming	Four- Square Spirit Tag Fruit Basket Swimming	Builders and Bulldozers Rock, Paper, Scissors Kickball Swimming	Boom Ball Hockey Freeze Tag Swimming	Pin Dodgeball Ultimate Soccer Kids Choice Swimming	
23	24	25	26	27	
Ghost in the grave	Doctor Dodgeball	Manga	Scooter games	Star Wars Dodgeball	
Capture the Flag	Mummy Bowling	Halloween Relay Race	Ultimate Soccer	British Bulldog Tag	
Sharks & Minnows Tag	Lord of the Flies Tag	Fruit Basket Tag	Spirit Tag	Zombie Tag	
Swimming	Swimming	Swimming	Swimming	Swimming	
30	31	Nov 1	2	3	
Spooky skits	HALLOWEEN	Relay races	Scooters	Battleship	
Pumpkin Hockey	PARTY	Soccer	Star Wars Dodgeball	Cric ball	
Spider Web Tag	WEAR YOUR COSTUME	Line Tag	Line Tag	Capture the Flag	
Swimming		Swimming	Swimming	Swimming	
	*No swimming*				

⇒ Upcoming Youth Sports : Volleyball, Soccer, T-Ball, Flag Football, Basketball Clinic, Preschool Sports.

Questions? Check out the website - www.recreation.slco.org/jlsorenson

Or contact Angie Smith at ansmith@slco.org

Register online at activityreg.com or at the front desk

Be Healthy Be Active

<ul> <li>WEEKLY REGISTRATION</li> <li>⇒ Check the box for each week you are registering for.</li> <li>⇒ For weekly/daily registration only a credit will be issued for this program. No refunds.</li> </ul>	CHECK BOX BELOW	DATE	TIME OF PROGRAM	FEE		
		Oct. 16-20	10:45am-2:30pm	\$40		
		Oct. 23-27	10:45am-2:30pm	\$40		
		Oct. 30-Nov. 3	10:45am-2:30pm	\$40		
DAILY REGISTRATION	LIST SINGLE DATES			\$10/DAY		
SUPER SPORT REGISTRATION FORM (Please print c	• •					
Name of Participant		Birthday	Boy	Girl		
Address	C	ty	StateZip			
AgeSchool_	Age GradeSchoolParent or Guardian					
Email		Phone:				
In Emergency Notify (other than p						
Youth Sports Registration Statement	Parental Statement of	Agreement — Assumption of F	Risk Tiahility Release and Refund Po	licy		
freely and voluntarily agree to assume and ac 2) Release: In consideration of my child's partic Lake County and its officers, agents, and emp Lake County on account of personal injury, pr County recreational activities.	or death. In consideration of r cept any and all risks to my chil cipation in the Salt Lake County loyees from any cause of action operty damage, death, or accid	ny child's participation in such activition of or myself associated with my child's recreational activities, I, for myself, man, claim, or demand of any nature whatent of any kind, caused by, arising out	es, I for myself, my child, my heirs, my executors participation in Salt Lake County recreational and child, my heirs, my executors and administratives over I or my child may now have, or have in the of, or in any way related to my child's participation.	s and administrators, activities. tors hereby release Salt the future, against Salt ation in Salt Lake		
Salt Lake County recreational activities. I agre	claims, demands, losses, or cos ee that my duty to defend and i ssessed against the County for	ts of any nature whatever cause by, a ndemnify the County under this Agree the defense of any claim or to satisfy a	rising out of, or in any way related to my child's ement includes all attorney fees, litigation and c any settlement, arbitration award, or verdict pa	participation in the ourt costs, expert		
4) Refund: Refunds may only be requested in p may withhold 25% of the refund (program reg				Recreation Division		
5) Collections: I agree to pay Salt Lake County all costs incurred, together with reasonable attorney's fees in the event that my account is referred for collection. I understand that any account delinquent 30 days or more will be turned over to collection.						
6) Emergency Treatment: I hereby authorize Salt Lake Parks and Recreation program staff to act on my behalf in accordance with their best judgment in case of an emergency involving my child, and agree to assume full responsibility for all expenses, medical or otherwise, that may arise there from.						
<ol> <li>Media Consent: I hear by grant permission to purposes in any and all publications and medi</li> </ol>	ia without limit or compensatio	n.		ty and educational		
8) For inclusion opportunities for p	people with disabilities, cor	tact Ashley at 385-468-1520 or a	bowen@slco.org.			
9) Name Posting: Unless otherwise indicated be Salt Lake County website	low, Salt Lake County is authori	zed to post or publish the name of my	r child participating in Salt Lake County recreation	onal activities on the		
☐ I do not authorize Salt Lake Coun	ty to post or publish the name	of my child participating in Salt Lake C	ounty recreational activities on the Salt Lake Co	unty website		
By signing the assumption of risk, liability release that I agree to its terms. If any portion of this Agr force and effect.		-				
Name of Child Participant:		Signature (Parent or Legal Guard	ian):	Date		

Amt.:

By:

Date:

OFFICE USE ONLY.....Receipt #: