



# NORWALK PARKS & RECREATION

100 Republic Street

[www.norwalkrec.com](http://www.norwalkrec.com) (419) 663-6775

## SPORTIES FOR SHORTIES – Tee ball 2024

\*\*\* PROGRAM INFORMATION SUBJECT TO CHANGE AT ANY TIME \*\*\*

This is a parent and child interactive teeball program. Parents/guardians will be working directly with their child to learn the basics of the sport through different games and activities. A staff leader will direct you through this fun program for five weeks.

**Age:** 3-4 years  
**When:** April 25 – May 23  
**Day:** Thursday PM (4:30 or after)  
**Where:** Bishman Park / Rec gym  
**Register:** **March 18-April 14**  
\$20 for Norwalk City residents/students and Ernsthansen Members  
\$25 for out of town students  
\$5 additional per student; Late registration beginning **April 15**:

**REQUIREMENT FOR PLAYERS**  
A new state law, known as "Lindsay's Law," calls for pre-participation education and training for families & coaches, with guidelines for recognizing and dealing with the symptoms of **Sudden Cardiac Arrest**. It aims at raising awareness of **Sudden Cardiac Arrest** to ensure preparedness and proper response in the event of medical emergencies.  
**Here are the REQUIRED steps:**  
1) Watch short **SCA** video @ [norwalkrec.com](http://norwalkrec.com).  
2) Sign the **REQUIRED SCA** form on back.  
3) Return signed form at time of registration.  
**NO CHILD MAY PARTICIPATE WITHOUT FORM**

Checks are to be made payable to 'City of Norwalk.'  
All forms and fees must be turned into the Ernsthansen Community Center.

(The Park & Rec. Dept. does offer financial assistance for youth fees. Please contact the center for information).

Child's Name \_\_\_\_\_ School \_\_\_\_\_ Member Exp. \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Phone \_\_\_\_\_  
Age \_\_\_\_\_ Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Male \_\_\_\_ Female \_\_\_\_ Height \_\_\_\_' \_\_\_\_" Weight \_\_\_\_\_

Parent email \_\_\_\_\_

Mother's Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Mother's Employment \_\_\_\_\_ Business Phone \_\_\_\_\_  
Father's Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Father's Employment \_\_\_\_\_ Business Phone \_\_\_\_\_  
Alternate person to be contacted \_\_\_\_\_ Phone \_\_\_\_\_

Facts concerning your child's medical history including allergies, medications being taken, and any physical impairments that would be beneficial for this department to be aware of:

I agree that I will hold harmless and indemnify any rights and claims for damages against the Norwalk Parks & Recreation Dept. or the City of Norwalk for any injuries incurred during activities my child is participating in, including but not limited to exposure to or illness resulting from COVID-19. I assume all responsibility as a result of my child being permitted to participate in the programs. The alternates listed above are hereby authorized in my absence to consent for treatment to be given to my child. In the absence of myself and all alternates listed above, I hereby give my consent for treatment deemed necessary by any acting physician or dentist.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

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RN: \_\_\_\_\_ Date \_\_\_\_\_ Amt. Pd. \_\_\_\_\_ Initials \_\_\_\_\_  SCA FORM