



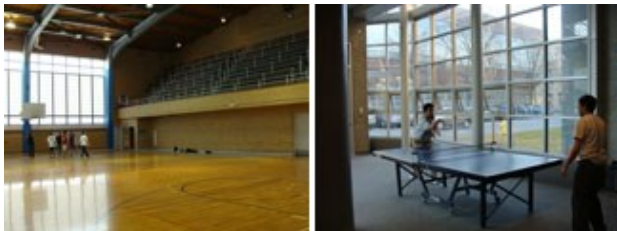
# Schedule:

**Spring 2017 Open Registration:**  
9:00a.m. – 11:30a.m.  
Archbold Gymnasium Lobby

**Spring 2017 Class Dates:**  
January 21  
February 11, 18, 25  
March 25  
April 1, 8, 15, 22, 29



## NEIGHBORHOOD YOUTH RECREATION PROGRAM



- ◆ **Gymnastics**
- ◆ **Basketball**
- ◆ **Yoga**

# NEIGHBORHOOD YOUTH RECREATION PROGRAM

Thank you for your interest in the Neighborhood Youth Recreation Program. NYRP is a Department of Recreation Services and Syracuse University-sponsored program, providing free recreational opportunities for youth ages 5-13 from the Syracuse community.

NYRP is designed to give community youth, ages 5-13, regardless of their economic situation, the opportunity to participate in safe, structured recreational activities. Instruction is available in **Gymnastics, Basketball, Yoga and Tutoring**

Sessions are held on Saturdays throughout the school year, from 9:00am to 11:30am.

Open Registration for the Spring session is from 9:00 to 11:30am during program hours in the Archbold Gymnasium lobby. **Parents/guardians must attend the Open Registration session.**

For more information, please contact the Assistant Director for Programs, **Ernie Rivera** at [errivera@syr.edu](mailto:errivera@syr.edu) or **315-443-3288**.

# Sign Up:

Select Recreational Activity

Basketball

Gymnastics

Yoga

## Parent/Guardian or Head of Household:

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Address:

\_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

## Emergency Contact:

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Relation: \_\_\_\_\_

Phone: \_\_\_\_\_

## Participant Information:

Child's Last Name: \_\_\_\_\_

Child's First Name: \_\_\_\_\_

Age: \_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

M/F: \_\_\_\_

Does the participant need any special accommodations or assistance?

**YES NO**

If **YES**, please explain:

\_\_\_\_\_  
\_\_\_\_\_

Previous injuries or medical conditions?

\_\_\_\_\_  
\_\_\_\_\_

## Please Note:

All participants in programs and opportunities provided by Syracuse University are exposed to the possibility of physical injury due to the nature of these activities. Each participant accepts the risk and responsibility as their own by choosing to participate in these activities. By so participating, each participant waives and releases any and all right and claims for damages that the participant his/her heirs or successors may have against Syracuse University or its personnel arising out of or resulting from the participation in Syracuse University's programs and opportunities.

## Signature:

X \_\_\_\_\_

Date: X \_\_\_\_\_