

Town of Kent Recreation & Parks



2015 Fall Kickin' Kids



Martial Arts



Learn the martial arts with Just for Kicks at their new facility conveniently located in the plaza across from the Kent Schools

Registration includes one to two lessons a week for six weeks as well as a uniform to keep!



Along with personal fitness and martial arts skills, this program promotes self discipline and personal confidence with Just for Kicks' industry leading character development curriculum

Detailed flyer and registration form can be found on the following pages!

Louis M. Fernandez
Director of Recreation and Parks



Town of Kent Recreation and Parks Department
25 Sybil's Crossing Kent Lakes, NY 10512

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Webpage: www.townofkentny.gov

Kent Recreation and Just For Kicks Martial Arts Center Present:

2015 Fall Kickin' Kids

Martial Arts Program

Program Description:

This 6 week course is a basic introduction to the Martial Arts that also includes Just For Kick's industry leading character development curriculum. Classes will take place at Just For Kicks. Children will learn basic kicks, blocks, self-defense and much more. The program fee includes a uniform for the children to keep.

Program Dates & Fees:

Classes begin the week of September 28 and run for six consecutive weeks. Children 3 and 4 will attend one class per week; children 5 and older will attend two classes per week. A variety of day and time slot choices are available as shown below and should be selected on following registration form. Once a day/time has been selected it must be attended throughout the duration of the program. Program fees are shown below.

Age:	Fee Payable to Just For Kicks Martial Arts		Fee payable to Kent Recreation	
	\$55.00		\$15.00	
3 – 4 year olds	Choose One: Tuesday @ 4:30pm	Thursday @ 4:30pm	Saturday @ 9:00am	
5 – 6 year olds	Choose Two: Monday @ 5:15pm Thursday @ 5:00pm	Tuesday @ 5:00pm Saturday @ 9:30am	Wednesday @ 5:15pm	
7 – 9 year olds	Choose Two: Monday @ 5:45pm Thursday @ 5:30pm	Tuesday @ 5:30pm Saturday @ 11:00am	Wednesday @ 5:45pm	
10+ year olds	Choose Two: Monday @ 4:30pm Thursday @ 7:15pm	Tuesday @ 7:15pm Saturday @ 11:00am	Wednesday @ 4:30pm	

Program Location:

Just For Kicks Martial Arts Center
1100 Route 52
Carmel, NY 10512

For more information on Just For Kicks visit: <http://www.carmelkarate.net/>

Registration begins on Monday, August 31 at the Recreation Office

Registration ends September 25!

**Kent Recreation and Parks Department**

25 Sybil's Crossing, Kent Lakes, NY 10512

Phone: 845-531-2100

E-Mail: recreation@townofkentny.gov

Find us on Facebook at townofkentrecreation

**2015 Fall Kickn' Kids
Martial Arts Program
Registration Form**

Fill out form completely. Please print legibly!

Classes Begin the week of September 28		Fee Payable to Just For Kicks Martial Arts	Fee payable to Kent Recreation
Age:		\$55.00	\$15.00
3 – 4 year olds	<input type="checkbox"/> Choose One: <input type="checkbox"/> Tuesday @ 4:30pm <input type="checkbox"/> Thursday @ 4:30pm <input type="checkbox"/> Saturday @ 9:00am		
5 – 6 year olds	<input type="checkbox"/> Choose Two: <input type="checkbox"/> Monday @ 5:15pm <input type="checkbox"/> Tuesday @ 5:00pm <input type="checkbox"/> Wednesday @ 5:15pm <input type="checkbox"/> Thursday @ 5:00pm <input type="checkbox"/> Saturday @ 9:30am		
7 – 9 year olds	<input type="checkbox"/> Choose Two: <input type="checkbox"/> Monday @ 5:45pm <input type="checkbox"/> Tuesday @ 5:30pm <input type="checkbox"/> Wednesday @ 5:45pm <input type="checkbox"/> Thursday @ 5:30pm <input type="checkbox"/> Saturday @ 11:00am		
10+ year olds	<input type="checkbox"/> Choose Two: <input type="checkbox"/> Monday @ 4:30pm <input type="checkbox"/> Tuesday @ 7:15pm <input type="checkbox"/> Wednesday @ 4:30pm <input type="checkbox"/> Thursday @ 7:15pm <input type="checkbox"/> Saturday @ 11:00am		

Participant Information

Participant's Last Name:		First:	MI:	Birth Date:	Age:	Sex:
						Male <input type="checkbox"/> Female <input type="checkbox"/>
Street Address:			Home Phone Number:		Secondary Phone Number:	
City:	State:	ZIP Code:	E-Mail		E-Mail 2	
Shirt Size: Y A	Pant Size: Y A	Child's Height:	Child's Weight:	Does the child have any Martial Arts Experience?		
S M L XL	S M L XL			Yes <input type="checkbox"/> No <input type="checkbox"/>		
Does your child have any disabilities, allergies or special circumstances we should be aware of? Yes <input type="checkbox"/> No <input type="checkbox"/>						
If yes, please explain:						

Parent/Guardian Information

Father's Name:		Mother's Name:	
Home Phone:	Cell Phone:	Home Phone:	Cell Phone:

Emergency Contact Information

In an emergency I/We cannot be reached please contact:	Relationship to Participant:	Phone Number:	2nd Phone Number:

Parent or Guardian Authorization, Disclaimer and Waiver of Liability

By law The Kent Recreation and Parks Department cannot and does not provide medical insurance for the participants in its programs. I hereby authorize my son/daughter to participate in the martial arts program sponsored by The Kent Recreation Department. I hereby release the agents, servants and employees from any liability for personal injury or property damage sustained by my child in connection with such participation. In the event of injury, I authorize Kent Recreation officials to take my child to a hospital for treatment at my expense.

Date:	Parent or Guardian Signature:
	Please Print Name:

Office Use

Registration Date:	Registration Fee:	<input type="checkbox"/> Cash	Make checks payable to:	Check Number:	Receipt Number:
			Kent Recreation		