



**Holy Name of Mary School presents F.A.S.T.
Athletics Super-Sports After School Sports Program**

Get up, get going, and get active with F.A.S.T. Athletics Super Sports Program. F.A.S.T. Athletics will offer a variety of sports each week such as: Soccer, Baseball, Flag Football, Basketball, Dodgeball, Gagaball, and Kickball. Each programs will include different warm up games and movement games, such as capture the flag, relay races, and many more exciting activities.

APPLICATION FOR FAST ATHLETICS

STUDENT NAME _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 HOME PHONE _____ WORK PHONE _____
 EMERGENCY CONTACT INFO/CELL PHONE _____

EMAIL ADDRESS _____
 GRADE _____ AGE _____ ALLERGIES, IF ANY _____
 (If your son or daughter has Asthma, please make sure they have an inhaler with them, nurses office may be locked during program time)

NEW 8 week Super-Sports Session – GRADES K-6
Program Dates: Monday October 21, 28, November 4, 18, 25,
December 2, 9, 16
Time: 3:00-4:00 Price \$99.00 22 student max!

Children will be split up into two groups, with similar grade levels

Consent and Release Form

My son/Daughter is in good health and has my full permission to participate in the F.A.S.T. Athletics Programs. He/she has no previous illness or bodily injury that is contradictory to participation. In the event I cannot be reached, I hereby authorize emergency or other medical treatment for my child that may be deemed necessary. I, the undersigned, individually and as the parent or guardian of the below minor, ask that he/she be admitted to participate in the F.A.S.T. Athletics Program. In consideration of such admission, I do hereby release, discharge, and hold harmless F.A.S.T. Athletics, its officers, agents, coaches, of and from all causes, liabilities, damages, claims, or demands whatsoever on account of injury or accident involving said minor arising out of the minor's attendance at the F.A.S.T. Athletics program or in the course of competition and/or activities in connection with the program.

Childs Name (Please Print) _____

Parent Signature _____ Date _____

REGISTRATION DIRECTIONS:

Please make **check or cash payable to F.A.S.T. Athletics** and send to the attention of the Main Office. All Checks must be received before the start of the program. Space is limited so please don't wait!

Please make sure your child has sneakers with them to change into.