



2001 Municipal Court  
 Harrison City, PA 15636  
 (724) 392-4555  
 (724) 744-2172-fax

Mon-Fri, 9:00am-4:00pm  
 www.ptarc.org  
 Facebook.com/ptrecreation

**REGISTER ON-LINE  
 ON OUR WEBSITE:  
 WWW.PTARC.ORG**

Questions? Call us, we're here to help!

## PTARC YOUTH PROGRAMS

### RECREATIONAL DODGEBALL Ages 8-12

Did you know that dodgeball is one of the most popular kids sport out there? Dodgeball is a good, overall workout. Avoiding the ball improves leg and arm strength, hand/eye coordination, and gives kids a good cardio workout while having a ton of fun!!



**Instructor: Robbie McConnell**

**Location: Penn Middle Auxiliary Gym**

**Time: Thursdays, 7:30-8:30 pm**

**6 Week Session: March 12-May 7 (no 3/26, 4/9 & 4/30)**

**Fee: PTSD Residents \$29, Non-Residents \$37**

### BREAKAWAY BASKETBALL Ages 8-12

Instructional and recreational basketball program where players are taught the basics of dribbling, passing, shooting, positioning defense, and rebounding in a fun-oriented program. Please bring a basketball and wear gym shoes!



**Instructor: Coach Robbie McConnell**

**Location: Penn Middle Auxiliary Gym**

**Time: Thursdays, 6:30-7:15 pm**

**6 Week Session: March 12-May 7**

**\*\*no 3/26, 4/9 & 4/30**

**Fee: PTSD Residents \$24, Non-Residents \$32**

### TUMBLING EXTREME Ages 7-12

This class focuses on beginner tumbling skills/jumps in a safe and fun environment. Students will be able to utilize spring floors, trampolines, tumble tracks and foam pits to gain confidence and achieve their tumbling goals. Give it a try and get your heart pumping! FUN for all levels!!

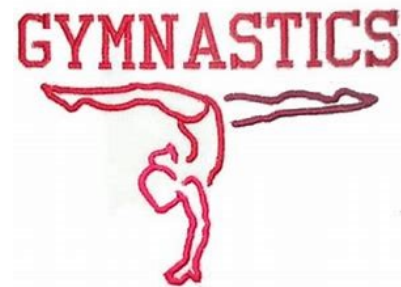
**Instructor: Alison Biondi's Gymnastic Instructors**

**Location: Alison Biondi's Gymnastic Facility**

**Time: Mondays, 5:00-6:00 pm**

**6 Week Session: March 9-April 13**

**Fee: PTSD Residents \$34, Non-Residents \$42**



### 2020 Winter Dodgeball, Basketball & Tumbling

Participant Name \_\_\_\_\_

Address \_\_\_\_\_

EMAIL Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Birthdate \_\_\_\_\_ Age (if under 18) \_\_\_\_\_

Please circle where you live: Penn Borough Manor Trafford Penn Township Non-Resident

Primary Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

Program Name/Start Date/Time \_\_\_\_\_

**Adult participant signature required below. Parent signature required below for all participants under the age of 18.**

The undersigned individual (parent or guardian if under age 18) represents that the registrant is in good health and can participate in the above listed activity and with prior knowledge of the physical nature of the activity releases Penn-Trafford Area Recreation Commission (PTARC), and Department, the Penn-Trafford School District, the Borough of Manor, the Borough of Penn, the Borough of Trafford, Penn Township, and/or its affiliates or subsidiaries, officers, directors, agents, or employees from any and responsibility for injury to the registrant through negligence or otherwise while he/she is participating in the activity. The parent, guardian, or participant assumes all risks inherent in the activity and will hold the Penn-Trafford Area Recreation Commission and Department, the Penn-Trafford School District, the Borough of Manor, the Borough of Penn, the Borough of Trafford, Penn Township, and/or its affiliates or subsidiaries, officers, directors, agents, or employees harmless from any and all claims or causes of action that may arise from this activity. The undersigned individual also hereby gives permission to Penn-Trafford Area Recreation Commission to use photographs of the participant for the promotion of Penn-Trafford Area Recreation events and programs. The participant agrees to hold the Penn-Trafford Area Recreation Commission, the Penn-Trafford School District, the Borough of Manor, the Borough of Penn, the Borough of Trafford, Penn Township, and/or its affiliates or subsidiaries, officers, directors, agents, or employees free and harmless from liability of any nature.

*Keep top portion*

*Cut & mail bottom*

*portion to:*

*PTARC*

*2001 Municipal Ct.*

*Harrison City, PA*

*15636*

*Make checks*

*Payable to PTARC*

**\*PARENT or Guardian SIGNATURE**

**DATE**

**\*\* Pre-Registration Required If you'd like to pay by credit card please visit [www.ptarc.org](http://www.ptarc.org)**