



2001 Municipal Court
 Harrison City, PA 15636
 (724) 744-2171 x204 or x205
 (724) 744-2172-fax

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

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

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

2018 PTARC SUMMER CLASSES STARTING IN JUNE/JULY

BEGINNING YOG-A-LLET

Ages 2 & Up
 Start your tiny dancer in a fun movement class combining Ballet and Yoga. Learn ballet positions and steps, yoga poses for stretching and balance and a short routine.
 Instructor: Maggie Black
 Location: Penn Township Ambulance
 Time: Wednesday, 10:30-11:00 am (ages 2-4)
 OR Wednesday, 11:00-11:30 (ages 5-7)
 6 Week Session: June 13-August 1
 (No class 6/27 or 7/4)
 Fee: PTSD Residents \$29 Non-Residents \$37



PINT-SIZE POM POMS

Ages 4-6
 This energetic class will teach basic cheer & dance moves with pom poms, also learn beginner jumps & gymnastics moves. Wear shorts, athletic shoes and pull back long hair. Bring pom poms.
 Instructor: Alayna Moorhead
 Location: Penn Township Ambulance
 Time: Mondays 5:30-6:00pm
 Date: June 18 - July 23 (No 7/2 & 7/9)
 Fee: PTSD Residents \$29 Non Resident \$37



**TRAMPOLINE
 & FOAM PIT TUMBLING**

Ages 5-10
 Class will utilize in-ground trampolines, tumble tracks and foam pits. Great fun for beginners learning new tricks and the more experienced tumblers to perfect their skills.
 Instructors: Alison Biondi's Gymnastic Instructors
 Location: Alison Biondi's Gymnastic Facility
 Time: Tuesdays, 5:30-6:30 pm
 4 Week Session: July 10-31
 Fee: PTSD Res. \$29 Non-Residents \$37



INTRO TO CHEERLEADING

Ages 7-10
 Learn the basics of cheerleading from a Penn Trafford High School Cheerleader. Learn proper voice, jumping skills, dance tips, round off techniques and how to be a good citizen. Learn a cheer routine and more to present at the end of your session.
 Instructor: Alayna Moorhead
 Location: Penn Township Ambulance Bays
 Date: Mondays
 Time: 6:00-7:00pm
 4 Week Session: June 18 - July 23 (No 7/2 & 7/9)
 Fee: PTSD Residents \$34 Non Resident \$42



2018 PTARC Summer Classes



Participant Name _____

Address _____

EMAIL Address _____

City _____ Zip _____ Birthdate _____ Age _____

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

Primary Phone _____ Alternate Phone _____

Program Name/Start Date/Time _____

Keep top portion

*Cut & mail bottom
 portion to:
 PTARC
 2001 Municipal Ct.
 Harrison City, PA
 15636*

*Make checks
 Payable to PTARC*

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.

***PARENT or Guardian SIGNATURE**

DATE

****** Want to pay by Visa, MasterCard or Discover? Check this box and we will call you******

