Registration Form

Name _____

Address _____

City _____ State _____ Zip _____

School _____ Grade _____ Date of Birth _____

Parent/Guardian(s) _____

Phone (Home) _____ (Cell) _____

Email _____

Class Day _____

Allergies/Extra Notes _____

_____

I am enrolling for the following class session or sessions (please circle the corresponding dates):

Monday Sessions	**Thursday Sessions**	**Saturday Sessions**
(Jan) 7, 14, 21, & (Feb) 4	(Jan) 10, 17, 24, & 31	(Jan) 12, 19, 26, & (Feb) 2
(Feb) 11, 18, 25, & (Mar) 4	(Feb) 7, 14, 21, & 28	(Feb) 9, 16, 23, & (Mar) 2
(Mar) 11, 18, & (Apr) 8, 15	(Mar) 7, 14, 21, & (Apr) 4	(Mar) 9, 16, 23, & (Apr) 6
(Apr) 22, 29, & (May) 6, 13	(Apr) 11, 18, 25, & (May) 2	(Apr) 13, 20, 27 & (May) 4
(May) 20, 27, & (Jun) 3	(May) 9, 16, 23, & 30	(May) 11, 18, 25, & (Jun) 1

MISSION STATEMENT

The goal of the Bouncing Bulldogs program is to promote jump rope for fun and fitness, and to help all children grow physically, emotionally, socially, and academically. Education, good sportsmanship, leadership, and teamwork are emphasized among all team members.

"The sky is NOT the limit!"

www.bouncingbulldogs.org

2019 Bouncing Bulldogs Jump Rope Classes

Learn from the National and World Champion Bouncing Bulldogs Jump Rope Team!

JUMP IN ON THE FUN!

Mondays, Thursdays, & Saturdays

FUN + FOCUS + FRIENDS

(919) 493-7992

Email: coach@bouncingbulldogs.org

PO Box 2026, Chapel Hill, NC 27515

www.bouncingbulldogs.org

COACH FREDRICK

Founder and Director

Ray N. Fredrick, Jr. is a retired Health and Physical Education Teacher. He retired from teaching in the Chapel Hill-Carrboro City Schools System in 2007, after teaching P.E. for 30 years in the State of North Carolina. As an internationally recognized teacher, Coach Fredrick has presented innovative jump rope techniques at camps, workshops, in-service meetings, and conventions world-wide. He has coached the Bouncing Bulldogs for 32 years.

"It's the kids that count!"

QUICK FACTS

2019 Bouncing Bulldogs Jump Rope Classes

FOR:

Boys and girls ages 5-18 years

WHEN:

Mondays & Thursdays:

4 - 5 pm

5:15 - 6:15 pm

Saturdays:

8:45 - 9:45 am

10 - 11 am

WHERE:

Bouncing Bulldogs Community Center:

101 South White Oak Drive

Chapel Hill, Durham County, NC 27707

COST:

4-Class Session: $60

3-Class Session: $45

*$15 per class

FAMILY DISCOUNT:

A 10% discount is applicable for each additional family member after registration of the first full tuition jumper.

Checks should be payable to:

Bouncing Bulldogs

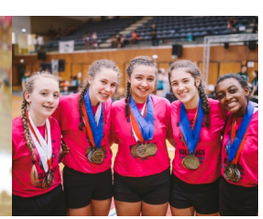
Online registration is also available at

www.bouncingbulldogs.org

HIGHLIGHTS

- Most up-to-date teaching techniques used
- Qualified staff members
- Low student-teacher ratio
- Confidence-building experience
- Up to six different styles of jump rope taught
- Promotes physical, social, and emotional growth
- Goal setting and high expectations
- Teamwork and life values taught

No previous jump rope experience required. Bouncing Bulldogs Classes offer youth the opportunity to develop coordination, communication, and collaborative skills through unique and effective jump rope activities. All ages are welcome to join us in promoting health, happiness, physical fitness, and fun!



Participant Release and Indemnity Agreement

We (or I) request that you accept the registration application of (applicant's name) _____ for Bouncing Bulldogs Jump Rope Classes. In consideration of acceptance, we (or I) hereby release the Bouncing Bulldogs, all its agents, and all persons associated with the Bouncing Bulldogs Jump Rope Classes of and from all claims or causes of action arising from damage or injury to the person or property of the applicant resulting from participation in Bouncing Bulldogs Jump Rope Classes, whether such damage or injury is the result of negligence or some other cause. I hereby agree to indemnify and hold harmless the Bouncing Bulldogs and its agents from any and all liabilities, claims, actions, or proceedings of every kind and character which may be presented or initiated by any other persons or organizations and which arise directly or indirectly from my participation in the Bouncing Bulldogs Jump Rope Classes. If medical attention is required for injury or illness while at a class, I give my permission for such medical care. Any such care can be given by the Bouncing Bulldogs or its agents in their sole discretion. All expenses for such treatment will be accepted by me, and I will hold the Bouncing Bulldogs and its agents harmless from the actions of those giving such treatment. We (or I) give permission for the Bouncing Bulldogs to use any films, videos or photographs of the applicant for publicity, advertising, or other commercial purposes.

Parent/Legal Guardian Signature (if under 18 years old) _____ Date _____