

Rice Recreation Summer Archery Program

- Rice Rec Phone: 320-493-5367 Gene Thomsen, Director
www.CityofRice.com/Recreation30 – Rice Recreation
- RICE Summer Archery Program 2020 July 14 – August 11, 2020 Tuesdays
- Cost for all Archery Program - \$10.00

This archery program will be a 5 week introduction into archery as well as teaching some life lessons along the way, join in the fun and one of the fastest growing sports and learn the international style, "11 Steps of Archery Success in a group setting.

Tuesdays starting July 14th, running two classes as they fill up 6 – 6:40 and 7-7:40 pm,

Ages 8-16 yrs. old

The Rice Recreation Department is funded through the City of Rice. For more information please call the City of Rice at 320-393-2280. Registration Information Forms are available at Rice City Hall, and online at www.cityofrice.com/recreation.

Registrations will not be accepted by phone.

Rice Recreation: Statement of Release: I agree to release Rice Recreation and its employees of all liability related to accidents or injuries which might occur while participating in this activity. I also give my permission for emergency medical procedures to be administered if I cannot be contacted in the event of an emergency. I also understand that Rice Recreation Staff or their representatives may photograph participants enrolled in programs or events.

Due to MDH and CDC guidelines there will be a waiver form for parents to sign.

If discipline problems occur, students may be dropped from the activity. Parent/Guardian Signature: _____

Make Checks Payable to: Rice Recreation. Pre-registration is mandatory.

Register by July 6th, 2020. Forms are available at: • Rice City Hall • Online at **www.CityofRice.com** click on "Recreation."

Registration will NOT be accepted by phone. Mail registration forms to: Rice Recreation PO Box 179, Rice MN 56367Rice

Recreation Summer 2020 Archery Registration Form

Child's Name - _____ Grade (20/21) _____ Age _____

Parent/Guardian Name _____ Township _____

Address _____

Home Phone _____

Work Phone _____ Cell Phone _____ Email _____

_____ Emergency Contact: _____

Phone: _____

Medical Information the coach should know:

Mail Registrations to: Rice Recreation, PO Box 179 Rice, MN 56367