

# SPORTS PLUS

Realize Potential



## Winter 2018 Special Needs Indoor Gym Program

SPORTS PLUS invites you to celebrate the arrival of 2018 with us and turn up the heat on fun and excitement in our indoor gym and sports program. The program will feature a variety of sports, fitness and teamwork activities and games.

SPORTS PLUS is a non-profit organization that offers uniquely structured coed sports and swim programs for verbal children able to follow multi-step directions between the ages of 5-21 with mild to moderate autistic spectrum disorders, ADD/ADHD and other developmental disabilities.

Each class will begin with the full group taking on either our ultimate obstacle course challenge or a specially designed fitness routine. Depending upon the week participants may run, jump, roll, crawl or practice other skills using a variety of different equipment. Each element of the obstacle courses and the fitness routines has been specifically selected by our staff to teach a different sports skill in a manner that maximizes fun and success for each participant. During each class, the participants will then be broken down into small age and skill appropriate groups where a different sport or set of skills will be emphasized. Activities may include volleyball, basketball, dodgeball, floor hockey, throwing and catching, relays, scooter racing, kickball and cutting edge fitness, agility and training techniques. Classes will conclude with a specially designed game selected from the sports listed above.

As always, the SPORTS PLUS winter program will feature unique skill development techniques, highly trained coaches, special education professionals, consistent encouragement and positive reinforcement. Fun, teamwork, social skills and sportsmanship are stressed at all classes. Participant to coach ratios are maintained at no higher than 3 to 1. Participation of typically developing siblings in each class is encouraged to allow siblings to play together and act as role models. The SPORTS PLUS model permits extra help or additional challenge to be provided as needed to participants with a wide variety of skills. The end result is a successful, rewarding and exciting physical and social experience for children and their families

Classes begin **January 21st** and class space is limited, so you are encouraged to register immediately. If you have any questions or need more information go to [www.playsportsplus.org](http://www.playsportsplus.org) or contact the SPORTSPLUS program at [\(301\)452-3781](tel:3014523781) or by e-mail at [sportsplus@comcast.net](mailto:sportsplus@comcast.net).

| <u>Day</u> | <u>Time</u>     | <u>Dates</u>      | <u>Class #</u> |
|------------|-----------------|-------------------|----------------|
| Sunday     | 1:00pm - 2:00pm | Jan. 21 - March 4 | 100            |
| Sunday     | 2:00pm - 3:00pm | Jan. 21 - March 4 | 200            |

**NO CLASS FEB 18**

All classes will be held at the Rachel Carson Elementary School  
100 Tschiffely Square Road, Gaithersburg, Maryland 20878

# Sports Plus \* Winter 2018 \* Registration Form & Consent/Liability Waiver

Mail to: Sports Plus Group, Inc., P.O. Box 83274, Gaithersburg, MD 20883

FIRST PREFERENCE CLASS# \_\_\_\_\_ SECOND PREFERENCE CLASS# \_\_\_\_\_

**NOTE: THERE WILL BE NO CLASS ON FEBRUARY 18**

**\*\*\* Enrollment cannot be guaranteed due to limited space\*\*\***

Child's Name: \_\_\_\_\_

Birth Date (MM/DD/YY): \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Parent Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email (mandatory): \_\_\_\_\_

Child's General Diagnosis: \_\_\_\_\_

Additional info you would like to tell us about your child: \_\_\_\_\_

**Class fee: \$160 per child - All fees are non-refundable**

**Check:** (Made payable to Sports Plus) Check Number: \_\_\_\_\_

**Credit Card:** MasterCard VISA (Circle one) Name on card \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiration \_\_\_\_\_ Security code \_\_\_\_\_

**If registering more than one child, please use a separate form for each**

**I wish to make an additional tax-deductible contribution to Sports Plus in the amount of: \_\_\_\_\_**

## Consent and Liability Waiver - Release of all claims (must be signed by parent or guardian)

I, \_\_\_\_\_ (parent/guardian), am the parent or legal guardian of \_\_\_\_\_ (minor child). As lawful consideration for my minor child being permitted to participate in the Program, I agree that neither my minor child nor I will make a claim against, sue, attach the property of or prosecute Sports Plus, The Montgomery County Public Schools (MCPS) and their officers, directors, agents, suppliers, contractors, representatives and employees for damages for death, personal injury or property damage which my minor child may sustain as a result of my child's participation in these sporting activities. This release is intended to discharge in advance Sports Plus, MCPS and their officers, directors, agents, contractors, suppliers, representatives and employees from and against any and all liability, including for negligent actions, arising out of or connected in any way with my minor child's participation in the Sports Plus Soccer Program, or any other activity except for liability that may arise out of the willful or wanton misconduct of Sports Plus, MCPS and their officers, directors, agents, contractors, suppliers, representatives and employees. I FURTHER UNDERSTAND THAT SPORTS AND THIS PROGRAM INVOLVE PHYSICAL CONTACT AND INHERENT DANGERS, THAT SERIOUS ACCIDENTS OCCASIONALLY OCCUR DURING SUCH SPORTING ACTIVITIES, AND THAT PARTICIPANTS IN SUCH SPORTING ACTIVITIES OCCASIONALLY SUSTAIN SERIOUS PERSONAL INJURIES (INCLUDING DEATH) AND/OR PROPERTY DAMAGE, AS A CONSEQUENCE THEREOF. KNOWING THE RISKS OF PARTICIPATION, NEVERTHELESS, I HEREBY AGREE THAT MY MINOR CHILD AND I ASSUME THOSE RISKS AND RELEASE AND HOLD HARMLESS SPORTS PLUS, MCPS AND THEIR OFFICERS, DIRECTORS, AGENTS, CONTRACTORS, SUPPLIERS, REPRESENTATIVES AND EMPLOYEES WHO (THROUGH NEGLIGENCE OR CARELESSNESS) MIGHT OTHERWISE BE LIABLE TO ME, MY MINOR CHILD (OR OUR HEIRS OR ASSIGNS) FOR DAMAGES.

I attest that I am eighteen (18) years old or older, and that my child is in good health, physically fit and has no known medical conditions which prohibit safe participation in this sport and is covered by health insurance. My child and I agree to follow all laws, rules and guidelines regulating the conduct of the program. I understand and agree that my child and I are responsible for the mechanical and/or operating condition of any and all sporting equipment provided by my child or by me for my child's use, and I agree that my child and I will continuously inspect and maintain all equipment used, even if we have obtained any of the equipment from Sports Plus, MCPS and their officers, trustees, agents, sponsors, suppliers, representatives and employees. I agree that Sports Plus, MCPS and their agents, sponsors and employees may use my child's photograph or video image in future promotions. I further agree to have an adult present and responsible for my child during class and that disruptive or aggressive behavior may be grounds for exclusion from the program at the sole discretion of Sports Plus.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND AND AGREE WITH ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY FOR MYSELF AND MY CHILD AND A CONTRACT BETWEEN MYSELF, MY CHILD AND SPORTS PLUS, MCPS AND THEIR OFFICERS, DIRECTORS, AGENTS, SPONSORS, CONTRACTORS, REPRESENTATIVES AND EMPLOYEES, AND I HAVE SIGNED IT OF MY OWN FREE WILL.

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_