

2023 STANHOPE SUMMER RECREATION (REC.) PROGRAM

INFORMATION

The **Stanhope Summer Recreation Program** will soon begin. There will be no charge for T-Ball or the recreation activities. T-ball participants should be pre-kindergarten through the 2nd grade, while participation in summer recreation activities is open to all kids (and kids at heart!).

The T-Ball program will consist of two weeks of practice (6:00 PM on May 24th & May 31st) and 4 weeks of games (6:00 & 7:00 PM on June 7th, June 14th, June 21st, and June 28th). All practices and games are anticipated to be held at the Stanhope Diamond in City Park. Coach Mark will provide schedules for the season at the first practice.

If you have a Stanhope T-ball shirt from previous years and it still fits, you do not need to purchase a new shirt. If you need a shirt, please indicate that on the attached registration form. The shirts are **\$10 each and you must pay when you hand in your registration form.**

The schedule for the Summer Recreation Program is not finalized at this time. The program is anticipated to consist of various recreation activities for approximately 1 hour for 1 day each week. The program will cover 6 weeks. More information will be sent out by Landon to the interested families once the schedule is complete.

The attached registration and authorization must be completely filled out and returned to the **<u>Stanhope City Office</u>** by **Friday, May 19th**.

For more information on T-Ball or the Summer Rec Program, please use the contact information below.

Mark Gansen, T-Ball Coach, 515-310-0077

Landon Sogard, Stanhope Rec Director, 515-709-9326

HAVE A GREAT SUMMER!!!!!

City of Stanhope 600 Main Street, P.O. Box 128 Stanhope, Iowa 50246 Telephone: 515-826-3290 Facsimile: 515-826-4290

2023 STANHOPE SUMMER RECREATION PROGRAM PARTICIPATION AUTHORIZATION

I, hereby authorize my child (children) listed below to participate in activities sponsored by the City of Stanhope and the Stanhope Summer Recreation Program.

I further agree to release the City of Stanhope, Iowa, its chief executive officer, all elected officer's, and officials, any and all employees and designated representatives from any and all liability associated with my child's (children's) participation in the 2023 Stanhope Summer Recreation Program activities.

Further, in the event of a medical emergency, I authorize the City of Stanhope, Iowa or its designated representative or representatives to seek and/or administer any emergency medical treatment deemed necessary for my child (children).

Parent or Guardian Signature					Date				
Street Address				City			Zip Code	•	
Home Telephone Number	Cell Phone Number			-	Work Telephone Number				
E-Mail Address (to notify of s	chedı	ule change	es)						
ame of Family Physician City				Phone Number					
Name(s) of Child(ren) Participat	ing	<u>T-Shirt</u>	Size			<u>Ball</u>			
1	[]Yes [] No	_]	erested progra	ams)]	
2	_ [] Yes [] No	_	[]	ſ]	
3	[] Yes [] No		[]	I]	
4	_ [] Yes [] No	_	[]	[]	
5	[]Yes [] No	_	[]	[]	
6	_ []Yes [] No	_	[]	[]	