

# TEEN DODGEBALL NIGHTS



## Upcoming Dates:

Friday, April 25	8pm - 10pm
Friday, May 16	8pm - 10pm
Friday, June 20	8pm - 10pm
Friday, July 18	8pm - 10pm
Friday, August 8	8pm - 10pm
Friday, September 5	8pm - 10pm
Friday, October 10	8pm - 10pm
Friday, November 7	8pm - 10pm

### DETAILS:

- ♦ For Boys and Girls 5th through 10th grade
- ♦ Games played on our indoor turf field
- ♦ Individuals will be formed into teams (or come with your friends and form your own team)
- ♦ Round robin tournament with prizes for the championship team
- ♦ Professional DJ here at every Dodgeball Night
- ♦ Pizza & sodas will be available for purchase (\$2 for a slice of pizza / \$1 for a drink)

### COST:

- ♦ \$10 per child if you register in advance (prior to each date)
- ♦ \$15 per child on the day of each Dodgeball Night
- ♦ Walk-ups are accepted but we encourage you to register in advance to guarantee you get a spot (only 100 spots available for each night)

Dodgeball Nights at The Arena Club are a great way to enjoy a Friday night with some friends (and a chance to meet new ones). Mark your calendar now and plan to join us for this great program once a month (*no Dodgeball Night in December*).

410-734-7300

2304 Churchville Road, Bel Air, MD 21015

[www.thearenaclub.com](http://www.thearenaclub.com)

Kids / Special Events



# Program Registration Form



**NAME OF PROGRAM:** \_\_\_\_\_

**DAY(S) OF PROGRAM:** \_\_\_\_\_ **DATE(S) OF PROGRAM:** \_\_\_\_\_

**PARTICIPANT'S NAME:** \_\_\_\_\_ **MEMBER:** Y N

**AGE:** \_\_\_\_\_ **DOB:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ **MALE or FEMALE:** \_\_\_\_\_

**PARENT NAME** (if participant is under 18): \_\_\_\_\_

**STREET ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**HOME #:** \_\_\_\_\_ **CELL #:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**EMERGENCY CONTACT:** \_\_\_\_\_ **CELL #** \_\_\_\_\_

**HEALTH INFORMATION:** Please list any special needs, medical or behavioral conditions, or medications that we need to be aware of to ensure your child's safety (allergies, asthma, etc.)

\_\_\_\_\_  
\_\_\_\_\_

**RELEASE:** I have read and answered to the best of my knowledge, the above questionnaire. I agree that all exercise and activities (including, but not limited to exercise classes, cardio, strength equipment, pools, field activities) here at the club shall be undertaken by me at my sole risk. I release Harford Health & Fitness Club, Inc., its officers, directors, employees and shareholders, from any claim for any injury to me personally, damage to my personal property, or theft thereof, while I am at the Harford Health & Fitness Club, including claims arising from negligence of Harford Health & Fitness Club employees or agents. I understand that I must be a current member in good standing at the time of service to receive member discount. All images taken can be used in all or any future marketing.

\_\_\_\_\_  
*Signature / Parent or Legal Guardian must sign if participant is under 18* \_\_\_\_\_  
*Date*

**PAYMENT:** TYPE: \_\_\_\_\_ TOTAL AMOUNT: \_\_\_\_\_ DATE PAID: \_\_\_\_\_  
VISA / MC # \_\_\_\_\_ EXP: \_\_\_\_\_

**FOR OFFICE USE ONLY:**

Staple Receipt Here  
←