Pickleball

If your new to this sport come and learn and we will provide all equipment need.

**When:** Thursdays February 20th – June 11th & Sundays February 23rd – June 14th

**Cost:** Residents: $30.00  Non-Residents: $45.00

**Who:** Adults (18 yrs. and older)

**When:** Thursday Evenings & Sunday afternoons at Sanbornton Central School

**Time:** 5:30-7:30pm Thursdays & 3:00-5:00pm Sundays

**What you will need:** Wear comfortable clothing, non-marking sole sneakers and bring a water bottle.

**What is Pickle Ball:** A fun sport that combines many elements of tennis, badminton and ping-pong. Played both indoors or outdoors on a badminton-sized court and a slightly modified tennis net. Played with a paddle and a plastic ball with holes. Played as doubles or singles.

For more information contact Amanda: 393-6665 Email: sanbrec@metrocast.net
Sanbornton Recreation PO Box 124, Sanbornton, NH 03269
Website: [http://www.sanborntonnh.org/Departments/Recreation/Recreation.htm](http://www.sanborntonnh.org/Departments/Recreation/Recreation.htm)

Check us out on [Facebook](https://www.facebook.com) (Sanbornton Recreation Department)
Name: ________________________________________________ Date: ________________

Address: ____________________________________________________________________

Phone: _____________________________ Cell: ____________________________________

E-Mail Address: ______________________________________________________________

I, __________________________ assume all risks and hazards incidental to such participation
including transportation to and from the activities, and I do hereby waive, release, absolve, indemnify
and agree to hold harmless the Sanbornton Adult Co-Ed Pickleball Program, the organizers, sponsors,
supervisors, and participants from any claim arising out of any injury to myself.

As a participant in Adult Pickleball, I will be responsible for leaving the area used in the same condition
as upon my arrival. In case of accident, I request the Sanbornton Adult Pickleball Program to contact:

Name: ___________________________ Phone #: _____________________________

If unavailable, please contact the physician indicated below and follow his/her instructions. I
authorize any treatment deemed necessary for myself.

Physician: ___________________________ Number:________________________

Player Signature: _____________________________ Date: ________________

For office personnel, only: Name: ___________________________ Date: ____________ 2020

Resident: $30.00 Non-Resident $45.00

☐Cash Payment $___________ ☐Check Payment: $_____________ Check #: _______

Any questions please contact the Sanbornton Recreation

603-393-6665 or email: sanbrec@metrocast.net

Like us on ☑