

PE FUN Fall 2025

SuperSquads, Inc. presents PE FUN Before School Program at Pointers Run Elementary School (PRES)

Register by Monday, September 15th

PE FUN K-3 Before School

WEDNESDAYS at 8:00 – 9:00 AM Grades K-3
Fee \$ 199 Min. 10 Max 30

Eight weeks of PE FUN! Experience the innovative extension to our PE program for younger students that offers a fun, safe, recreational, and non-competitive environment with individual, partner and small group games for maximum participation. Some of the favorite lead-up games include soccer activities, obstacle courses, noodle tag games, scooters, kickball games, fun warm ups, throwing and catching games, basketball activities, and more. Tons of new games each class! Join us to have a blast with PE Fun!

8 week program: Class starts on Wednesday, 9/17 at 8AM.

PE FUN 2-5 Before School

FRIDAYS at 8:00 – 9:00 AM Grades 2-5
Fee \$ 199 Min. 10 Max 30

Eight weeks of PE FUN! Experience the innovative extension to our PE program with fun activities that will make your child move and improve his/her overall fitness while having a blast! Some of the favorite lead-up games and fitness activities include invasion, crazy soccer, GAGA, medic ball, noodle tag games, scooter games, prison ball, kickball games, mission impossible, super hoops basketball, throwing and catching target games, noodle hockey, some DDR and more. Tons of new games! Join us to have a blast with PE Fun!

8 week program: Class starts on Friday, 9/19 at 8AM (No class on 10/17).

For more info on PE Fun Classes check out our twitter <https://twitter.com/PEFUN4FUN>

How To Enroll:

1. **REGISTER by Monday, September 15th** - return the registration to PRES PE Office or Front Office.
2. Make checks payable to "SUPERSQUADS, INC".
3. Please fill out the registration form on the back, place the check with registration in an envelope marked "PE FUN".
4. One registration form per student for all the courses registered.
5. Please Do Not combine checks. Make a check out for each course. Thank you.
6. If you have any questions, please email Ms. Brodka at katarzyna_brodka@hcpss.org

Class will be canceled if the minimum number of students is not met. Participants will be chosen on a first come, first serve basis. Confirmation will be sent by email at the end of registration period. If you do not receive a confirmation, please contact Ms. Brodka . Dates are subject to change. Note: No refunds after the first week of class.

The information is neither sponsored nor endorsed by HCPSS or the school.

REGISTRATION FORM ** Please return this page with your check.

The following must be signed before the beginning of the first class:

I hereby give permission for my child to participate in the program noted below. I understand and agree that SuperSquads, Inc is not the provider of this class, but has only arranged for the class to be held at PRES and coordinated the registration. The instructors are independent contractors, and are not employees or agents of SuperSquads, Inc. I understand and agree that any physical activities involved in this program may carry a risk of injury. I authorize SuperSquads, Inc. to consent to medical treatment for my child when I cannot be reached. I agree that no coverage or reimbursement for medical expenses shall be available from the SuperSquads, Inc or its agents and that I shall be responsible for all medical expenses relating to participation in this program. While all reasonable precautions will be taken to assure my child's safety and to prevent injuries from occurring, I will not hold the instructor, the SuperSquads, Inc and its officers and members, or the PRES staff liable for any accident or injury that may occur. My child and I understand and agree that, after one warning, any student who does not maintain appropriate behavior in class, or is not dropped off before 8:20AM (time is kept by the cell phone clock), will not be allowed to attend the remaining classes scheduled for that program. Parents will be notified at the time of the warning and before the child is removed from class. Refunds will not be issued for any student removed for these reasons. I have read, understand, and agree to these guidelines of SuperSquads, Inc Before School Programs.

Parent
Signature_____ **Date**_____ **Student Signature**_____ **Date**_____

Course Name(s) (PLEASE Check): _____ **PE FUN K-3 (Wednesday 8 AM)** _____ **PE FUN 2-5 (Friday 8 AM)**

Student's First and Last Name (PRINT PLEASE) _____

Grade _____ **Homeroom Teacher** _____

Emergency Contact 1 Name _____

Emerg. Contact 1 E- MAIL (PRINT PLEASE) _____

Home Phone_____ **Cell** _____

Work Phone_____

Emergency Contact 2_____ **Phone**_____

Before Care (Yes / No) _____ **Allergies/Special Needs**_____

Permission for the child to be photographed: Yes_____ **No**_____

Fee Enclosed (Checks payable to "SuperSquads, Inc") _____

One registration form per student for all the courses registered.

Please DO NOT combine checks. Make a check out for each course. THANKS!
