

Girls Refusal Skills Initiative

For Girls in 3rd - 8th Grade

Girls Refusal Skills Initiative is a 10 week instructional program for Bridgewater-Raritan girls. The program utilizes the National Institute on Alcohol Abuse and Alcoholism "Strategies to Prevent Underage Drinking". Through peer reinforcement, the program stresses positive life decisions and educates girls for a lifetime of self-respect and healthy living. Girls will have fun training for a 5K race while making friends and learning about themselves. **The emphasis is not on running but on having fun!** The girls are encouraged to set goals and meet them by walking, running, skipping or a combination of all three.

Girls in grades 3 - 5: Mondays 6:15-8pm & Wednesdays 6:30-7pm beginning April 4, 2016

Girls in grades 6 - 8: Tuesdays 6:45-8pm & Thursdays 6:45-8pm beginning April 5, 2016

Location: Bridgewater-Raritan Middle School Track

Cost: \$30.00 check payable to "GOTR of Central NJ" **Deadline to Register:** Monday, March 28, 2016

Final Race Day: Sunday, June 19th (Somerville)

For more information about Girls Refusal Skills Initiative contact Bridgewater Recreation's Program Coordinator Sue Cornet suecornet@msn.com. Space is limited; registration is based on first come first serve with the Bridgewater Recreation Department. Three ways to register! In-person at the Bridgewater Recreation Department (100 Commons Way) 9am to 5pm Monday to Thursday 8am to 5pm on Friday; drop registration off in the "REC" mail slot located on the Garretson Road side of the building (employee entrance); flush with the building 24/7; or via postal service.
Bridgewater Recreation Department 100 Commons Way - Bridgewater, NJ 08807 908-725-6373 www.bridgewaternj.gov

2016 Girls Refusal Skills Initiative

\$30.00 Check payable to "GOTR of Central NJ"

		3	4	5	6	7	8
Participants Last Name	First Name	Circle Current Grade (2015-2016 School Year)					
Mailing Address	Town	Zip					
Home #	Cell #	Work #					
Email Address (s) ~ mandatory , please print legibly! Program information will be sent via emails...							

/ /	Youth Medium	Youth Large	AS	AM	AL	AXL
Date of Birth	Circle Shirt Size					

If the participant has individualized needs due to a disability, please check the following and someone will contact you regarding reasonable accommodations. Yes, I will need to be notified regarding special considerations for my child.

Please note that Bridgewater Recreation Department does not provide individualized medical coverage for its participants. Each participant will be covered under his/her family's medical policy. It is recommended that families have insurance before the child participants. The Recreation Department reserves the right to cancel, alter, supplement, limit registration or change any other information.

 Parent/Guardian Signature _____ Date _____/_____/_____

