



ADULT (18+) INDOOR PICKLEBALL CLINICS – January session BEGINNER & LOW INTERMEDIATE OPTIONS

Pickleball is a paddle sport that combines elements of tennis, badminton, and ping-pong using a paddle and plastic ball with holes. It is a game that is appropriate for players of all ages and skill levels. Rules for pickleball are simple, making it a great introductory sport. It can also be quite a challenging, fast-paced, and competitive game when people become more experienced at playing.

3 Class Options - Saturdays~ January 10th – February 7th ~ Beginners 8 am – 9:30 am
Sundays ~ January 11th – February 8th ~ Beginners 8 am – 9:30 am ~~
Low Intermediate / Intermediate 9:30 – 11 am

Indoor at Forest Park Elementary School \$ 90 – North Kingstown residents \$100 – Non-residents
Pre-Registration Required REGISTRATION ENDS FRIDAY, JANUARY 16 AT 11:59 PM (pending availability)

We will have paddles and balls to borrow, or you can bring your own equipment.
Sneakers are required. Water and hand sanitizer is recommended.

Wayne Turner has been active in the Racquet Sports Industry for over 25 years, holding three professional certifications in pickleball, tennis and squash. He currently is a Director of Youth Development and Community Engagement at the Newport Pickleball Club in Middletown, RI and directs adult pickleball at the Rally Point Racquet Club in Greenville, RI. Wayne also oversees the North Kingstown youth pickleball and red ball tennis program.

Several ways to register and to contact us with questions or concerns:

✉ 100 Fairway Drive North Kingstown RI 02852
jblais@northkingstownri.gov



80 Boston Neck Road M-F 8:30 to 4:30pm



401-268-1540



Weather cancellation line 401-268-1543



<https://secure.rec1.com/RI/north-kingstown-ri/catalog>

If you are experiencing symptoms of illness, please stay home.

*****PLEASE PRINT CLEARLY*****
ADULT PICKLEBALL BEGINNER/INTERMEDIATE CLINIC – January 2026 CHECKS MADE PAYABLE TO: TOWN OF NORTH KINGSTOWN

EXPERIENCE (please check best option): ☐ *Never played* ☐ *Racquet experience but not with this kind of activity*
☐ *Beginner with limited experience* ☐ *Advanced Beginner (have played and had lessons)*

NAME _____ BIRTHDATE _____ M F

MEDICAL PROBLEMS (allergies, inhaler etc.) _____

ADDRESS _____ Zip Code _____

PRIMARY PHONE _____ RECEIVE TEXT NOTIFICATIONS? Y N

ALTERNATIVE PHONE _____ RECEIVE TEXT NOTIFICATIONS? Y N

****This feature may be of importance in relation
to program cancellation notices**

EMAIL _____@_____

☐ Email preferences: check here if you do not want to receive updates regarding this and other programs, as well as events

EMERGENCY CONTACT name/phone _____

**** ONE Emergency contact is mandatory, for additional please write a note or email to the office with contact information above.**

SIGNATURE _____ DATE _____

TOWN OF NORTH KINGSTOWN RECREATION DEPARTMENT
100 Fairway Drive North Kingstown, Rhode Island 02852
Phone (401) 268-1540
ADULT'S CONSENT TO PARTICIPATE

AND HOLD HARMLESS AGREEMENT AND RELEASE

I, (Print Name) _____ (hereinafter the participant) state that I wish to

participate in (Print Name of Event or Program) PICKLEBALL CLINIC sponsored by the North Kingstown Recreation Department (the "Recreation Department").

The participant understands that participation in the above program is VOLUNTARY and that the participant does not have to participate. It is understood that the program involves activities which could result in injury to the participant's person or damage to the participant's property, and that by participating, the participant voluntarily accepts and assumes the risk of personal injury and damage to property.

It is understood that the Recreation Department DOES NOT provide any insurance coverage for the participant's person or property; and the participant acknowledges that he/she is responsible for his/her safety and health care needs, and for the protection of his/her property.

In exchange for allowing the participant to participate in this event or program, the participant agrees to and hereby does release from liability, indemnify, and hold harmless the Town of North Kingstown, its agents, officers, and employees from any injury to the participant's person or damage to the participant's property which arises out of or occurs during or as a consequence of his/her participation in the event or program, whether or not such injury or damage may have been caused, in whole or in part, by any negligence or want or care on the part of the Town of North Kingstown, its agents, officers, or employees.

This Hold Harmless Agreement and Release shall be binding upon the participant and the participant's heirs, executors, administrators and assigns.

The participant understands that this document is complete unto itself and that any oral promises or representations made to him/her concerning this document and/or its terms are not binding upon the Town of North Kingstown, its officers, agents and/or employees.

Code of Conduct. North Kingstown Recreation expects all participants will abide by any and all rules set by the department, the instructor, and the facility. Please dress appropriately for the weather, for the program you have registered for and its requirements, and be mindful that most programs have children of all ages. Be present. Please turn off your cell phones and devices. Cooperate and respect your leadership. There is zero tolerance for discourteous behavior, rudeness, bullying, and harassment or threats to any participant or leader. Failure to follow any policies or procedures will result in immediate discharge without refund.

BY INITIALING I AGREE TO THE UNRESOLVED USE OF MY AND/OR LIKENESS (INCLUDING PHOTOGRAPHS, VIDEO TAPES, AND OTHER DEPICTIONS) FOR PUBLICIZING NORTH KINGSTOWN RECREATION ACTIVITIES AND EVENTS.

Participant's Legal Name (SIGN): _____

Date: _____

*We at NK Rec take your health and safety very seriously. We will be abiding by all State, CDC, North Kingstown Town and School protocols. Please always have a mask on hand. Please also bring your own hand sanitizer. If you have tested positive or recently been in contact with a positive case inform your coach/instructor **immediately**. If you are sick, **STAY HOME**.*

Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. **COVID-19 is extremely contagious** and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

North Kingstown Recreation Programming has put in place preventative measures to reduce the spread of COVID-19; however, NK Recreation **cannot guarantee** that you or your child(ren) will not become infected with COVID-19. Further, **attending NK Recreation Programming, being exposed to the public, could increase your risk and your child(ren)'s risk of contracting COVID-19**.....

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending NK Rec Programming and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, NK Rec employees, volunteers, and program participants and their families even though North Kingstown Recreation is taking all possible precautions.

By signing I understand that North Kingstown Recreation reserves the right to cancel the program for any given period of time due to COVID-19 cases and circumstances. In this case there is no guarantee of a refund, a prorated refund, or a make-up. Cancellations will only occur to keep the participants from further spread of the virus.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at NK Rec Programs or participation in NK Rec programming ("Claims"). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless NK Rec, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of programs, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any programming.

Signature of Parent/Guardian/Self

Date

Print Name of Parent/Guardian/Self

Print Name of Participant(s)
