

LEWISBORO PARKS AND RECREATION DEPARTMENT

Intro to Fencing – Cloak and Dagger Fencing, Instructors

Discover the thrilling Olympic sport of fencing in this fun, beginner friendly program! Participants will learn:

- Basic footwork and bladework
- Movement and coordination
- Safety procedures and fencing rules
- Core values of respect and sportsmanship

Each session builds skills and confidence, culminating in a friendly practice tournament where participants experience the excitement of real competition. Whether you're brand new to fencing or have a little experience, this program lays a strong foundation—and for those who fall in love with the sport, it's the perfect launchpad for further training at the Cloak and Dagger Fencing Club



FOR: Grades 3-8

WHERE: Lewisboro Gym (79 Bouton Road, South Salem)

WHEN: Sundays, 6 weeks – January 18th – March 8th (no class 2/15 & 2/22)

TIME: Grades 3-5: 12:30PM – 1:30PM
Grades 6-8: 1:30PM – 2:30PM

FEE: \$300.00

ACTIVITY #: Grades 3-5 – 113001-A1
Grades 6-8 – 113001-A2

NOTE: Bring water and running shoes.

**This flyer is being distributed by the School District as a community service to students and parents for information purposes only.
This program is neither affiliated with nor endorsed in any way by the School District**

ACTIVITY REGISTRATION FORM

(PLEASE PRINT AND FILL OUT COMPLETELY)

Adult Name _____

Mailing Address _____ City _____ Zip _____

Telephone (Day) _____ (Evening) _____

Emergency Name _____ (Telephone) _____

Elementary School Area (Check one): Increase Miller Meadow Pond Katonah

RESIDENT STATUS: Town of Lewisboro Resident

(Check one) Katonah/ Lewisboro School District

Email

Participant Name Last	First	Sex	Age	D.O.B.	Activity Number	Activity Name	Grade	Fees

Form of Payment: CASH CHECK CC **NO REFUND POLICY** **TOTAL FEES:** \$ _____

Make checks or money orders payable to **TOWN OF LEWISBORO**

By Mail:

Town of Lewisboro
Parks & Recreation Dept.
99 Elmwood Road
South Salem, NY 10590

GENERAL RELEASE: The undersigned hereby releases the Town of Lewisboro, its Town Board, Parks and Recreation Department, employees and volunteers thereof, of any responsibility should an accident or injury occur to the afore named participant as a result of participation in the aforementioned program sponsored by the Lewisboro Parks and Recreation Department.

Parent/Guardian
Signature _____ Date _____