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Tuesday, January 23, 2018

Dear Parents,

Batesville Primary School, Margaret Mary Health and the YMCA are joining together to help promote physical activity and nutrition. We're inviting you to join us for a three-week challenge to kick off the New Year by making your household a healthier one. Not only will this provide great family bonding, but it will also instill habits in your children that will help them prevent obesity and sedentary related conditions in their futures.

This program is called **Family Fitness Nights** and runs for three weeks. Batesville Primary School, Margaret Mary Health and the YMCA will be providing a family friendly workout once a week on Tuesday nights from 6:30 to 7:30 p.m. beginning February 6, 2018. The goal of these three workouts is to get your heart rate up, have fun and hopefully give you some new ideas to take home.

- February 6th Turbo Kick with Rose Lacey from the YMCA and First Tee golf, in cafeteria
- February 13th Heart Maze and from MMH Nutrition/Healthy Snacks with Melissa Bishoff, dietitian
- February 20th Tae Kwon Do with Master George Dwenger from the YMCA

The program is completely free and full of fun. **Please fill out the attached registration form and have your child return it to his/her teacher by Monday, February 5th.** You must have at least one child enrolled at BPS to participate; however, if you have other children in your family, they may participate with you as a family as long as they are at least 3 years of age.

If school is closed for a snow day, Family Fitness Night will be canceled for that week!

If you have any questions, please feel free to contact me. I look forward to seeing you at the Family Fitness Nights at BPS on Tuesdays, Feb. 6th, Feb 13th and Feb. 20th.

Sincerely,
Brad Stoneking, BPS Principal
bstoneking@batesville.k12.in.us
812-934-4509

believe in **better**

Family Fitness Program Registration/Consent Form

Please fill out the information below for each member of your family who will be participating in the Family Fitness Nights program. The signature box verifies that you agree to the consent form below. Please return to your child's teacher by Monday, February 5, 2018.

INFORMED CONSENT FORM

I am aware that participating in physical activity can be potentially hazardous. I assume all risks associated with participation in all YMCA, MMH, and BPS activities, including but not limited to falls, contact with other participants, the effects of the weather, traffic, and other reasonable risk conditions associated with the activity. All such risks to myself are known and understood by me.

I hereby authorize the staff of the YMCA, MMH and BPS to act for me according to their best judgment in any emergency requiring medical attention, and I hereby waive the release from YMCA, MMH and BPS from any and all liability for any injuries or illness incurred

Name	Age	Participant's Signature or guardian if under 18 years of age

Contact e-mail address: _____
 (will be used to send updates & reminders only)

_____ Please check here if you DO NOT have access to the Internet and will need to be contacted by phone.

Phone Number _____

BPS Student's Teacher: _____