



VILLAGE OF BRIARCLIFF MANOR RECREATION DEPARTMENT
3 Library Road, Briarcliff Manor, NY 10510
(914) 941-6560
www.briarcliffmanor.gov

❖ PUZZLEPALOOZA WITH PIZZA & PUNCH!

A brand-new twist on Game Night!  

Think you've got what it takes to crush a puzzle the fastest?  

Grab your family, your friends, or your favorite puzzle pros and form a team of up to 4 people! Every team gets the same puzzle, and the first to finish wins an awesome prize!   A prize to the 1st team done and a prize for the 1st Family with at least two team members under the age of 14. PLUS — every team takes their puzzle home!  

Get ready for a night of friendly competition, big laughs, and maybe a little smack talk . We're capping the event, so don't wait!

Fuel your brain with your own snacks or enjoy our Pizza & Punch while you puzzle it out!    

ELIGIBLE: Anyone who resides in the Village of Briarcliff Manor (VBMR) and Briarcliff Manor School District (BMSD). Non-residents (NONR) are welcome to join!

DATES & TIMES: Day: Friday Dates: January 30, 2026
6:00 pm – 8:30 pm Competition will be from 6:15 p.m. to 8:15 p.m.

LOCATION: Briarcliff Manor Youth Center – Upper Level, 5 Van Lu Van Rd, Briarcliff Manor

FEE: \$35.00- Village residents (VBMR)
\$45.00 – School District / Non-resident (BMSD/NONR)

DEADLINE: Thursday, January 29, 2026 at noon

REGISTRATION: Registration begins **Wednesday, December 10th at 9am**. Registration may be done online* from any device, in person (at the Recreation Office, 3 Library Rd) or by using the drop box outside the WJV Community Center, 3 Library Road. Space for all programs is limited and will be handled on a first come first served basis. In person and online registration will occur simultaneously. The drop box will be processed with the days' mail. *In order to register online you have an existing account for your household or create one through our Registration software, [CivicRec](#).

PUZZLEPALOOZA WITH PIZZA & PUNCH! – Winter 2026

Fees: \$35.00 – Village of Briarcliff Residents \$45.00 – School District / Non-resident (BMSD/NONR)

NAME: _____ CELL #: _____ TEAM NAME: _____

ADDRESS: _____

TEAM MEMBERS W/ages if under 18: _____

The undersigned hereby recognizes that there are inherent risks involved with participation in this program and agrees to release and hold harmless the Village of Briarcliff Manor, its employees, contractors and volunteers, of any liability whatsoever in connection with any damages and/or injuries that the above named person may sustain as a result of participation. If medical emergency arises, instructors will call 911. I give permission for my child to be transported to hospital and necessary treatment provided by hospital medical staff. I have read and fully understand the above acknowledgement of risk, release / indemnification and covenant not to sue. I have signed this document of my own free will, and agree to the terms outlined herein.

E-Mail Address: _____
(For receipt/notification purposes only)

Signature of Participant (or Parent/Guardian)

METHOD OF PAYMENT: CASH CHECK # _____ CREDIT CARD (additional 3% or \$2 min)

Checks payable to: Village of Briarcliff Manor (\$20 fee for returned checks).

DATE: _____

AMOUNT: _____

RECEIPT#: _____