



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

SUMMER SPORTS

FLAG FOOTBALL

Ages 6–12

VOLLEYBALL

Ages 4–14

Registration: April 19 – May 28

Members \$45/Community \$65

Volunteer coaches are needed to help
every season be the best it can be!

Contact Michele Morales at mmorales@ymcavictoria.org with questions.





YOUTH SPORTS FORM

Calhoun County YMCA

Select a YMCA Program

☐ **Volleyball (ages 4-10)** ☐ **Flag Football (ages 6-12)**

Registration is open April 19 – May 28 (Late Registration: May 29– June 1)

Are you a current Calhoun County YMCA member? Y N

Child's Name: _____

Gender M F DOB: _____ Age: _____ Grade: _____ Height: _____

Parent/Guardian Full Name: _____ Parent/Guardian DOB: _____

Primary Phone #: _____ Secondary Phone #: _____

School: _____ Parent/Guardian E-mail Address: _____

Address: _____ City/State _____

Child's jersey size:* Youth X-Small ☐ Youth Small ☐ Youth Medium ☐ Youth Large ☐
Adult Small ☐ Adult Medium ☐ Adult Large ☐

*(First jersey/shirt is included in registration fee. Additional jerseys will be at the expense of parent/guardian.)

Child's previous sport experience (circle one): None Moderate Extensive

I would like my child and (friend's name) _____ to be on the same team.

I would like my child to be coached by _____ (Coach/Team requests are not guaranteed)

Volunteers Are Needed - Would you like to volunteer as a: Coach ☐ Assistant Coach ☐

Name _____ Phone Number _____

Email _____

Financial Assistance - Y activities are designed to benefit persons from all backgrounds and fees are based on the cost of providing each program. Limited Financial assistance is available.

- Participants must abide by the Calhoun County YMCA code of conduct. The YMCA has the right to eliminate a player and or team for misconduct.
- Registration may close once teams are full.

Refunds

Participants may cancel registration for a program for any reason and will received a full refund or credit under these conditions: the request for refund must be completed 48 hours prior to the close of registration of the program or 48 hours before the start of the program - whichever occurs first. NO REFUNDS WILL BE GIVEN IF PARTICIPANT CANCELS LESS THAN 48 HOURS PRIOR TO THE START OF THE PROGRAM/SESSION.

Permission for Enrollment and Release of the YMCA of The Golden Crescent from Liability

I give my child permission to participate in Calhoun County YMCA activities. I understand that even when every reasonable precaution is taken, accidents can sometimes happen. Therefore, in exchange for the Calhoun County YMCA allowing my child to participate in YMCA activities, I understand and expressly acknowledge that I release the Calhoun County YMCA and its staff members from all liability for any injury, loss, or damage connected in any way whatsoever to participation in YMCA activities whether on or off YMCA's premises. I understand that this release includes any claims based on negligence, action, or inaction of the Calhoun County YMCA, its staff, directors, members, and guests. I have read and am voluntarily agreeing to this authorization and release.

Authorization of Emergency Medical Treatment

If my child should become ill or injured during a YMCA activity, I understand that the YMCA will, (1) contact me immediately or, (2) contact the person I have designated as the emergency contact person if I can't be reached. Should the YMCA be unable to reach me, or the person designated, they are authorized to arrange for immediate emergency treatment necessary to insure my child's health and safety. I accept responsibility for payment of medical services rendered.

Photo/Video Release

I grant permission to the Calhoun County YMCA to use photographs and videotapes taken of my child for YMCA publication purposes. I have read and understand the above information. My child has permission to participate in this YMCA Youth Sports Program with the conditions set forth.

Parent/Guardian Signature _____ Date _____

YMCA Staff Use Only: Amount Paid: _____ Date Paid: _____ Staff Initial: _____