

Tuscarawas County YMCA Youth Sports Registration Form

SPORT _____ SCHOOL _____ GRADE _____

Name of player _____ Sex M or F
(Last) (First)

Home address _____ Age of child _____

City, Zip Code _____ - _____ - _____ phone

Email address: _____

Parent(s) or Guardian(s) name _____

Cell phone _____ - _____ - _____ Work phone _____ - _____ - _____

Emergency contact: name _____ Phone _____ - _____ - _____

Special Health needs or concerns _____ Birthdate _____

<p>I am willing to participate as a volunteer in support of this program as a:</p> <p style="text-align: center;">Coach Assistant Coach Official</p> <p>Nights not available for practice: _____</p> <p style="text-align: center;">Preferred Coach: _____</p>
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Agreement:

1. I hereby certify that my child is in normal health and capable of safe participation in the youth sports program. I assume all risk(s) and hazards incidental to the conduct of this program and for the transportation to and from the program. I hereby authorize the Tusc. Co. YMCA to obtain medical treatment for my child in the event that parent(s) and the emergency contact cannot be reached.
2. I support the Tusc. Co. YMCA Youth Sports Philosophy which is based on participation, fun, physical fitness and health, skill development, teamwork, fair play, family involvement, and volunteer leadership.
3. I give permission to the Tuscarawas County YMCA to use, without limitation or obligation, photographs, film footage, or tape recording which may include an image or voice for purposes of promoting or interpreting YMCA programs.

Signature of parent or guardian _____

Cost: Members ages 3 – Kindergarten \$14	Others ages 3 – Kindergarten \$40
Members Grades 1 st – 8 th \$16	Others Grades 1 st – 8 th \$42

_____ **OFFICE USE ONLY** _____

Date ___/___/___ Coupon/Credit _____ Amount paid \$ _____ Clerk's initials _____