



# Hayes-Taylor YMCA Winter Basketball

1101 E. Market St.  
Greensboro, NC 27401

**Age Groups: \*Circle One**

Co-Ed: 3&4, 5&6, 7&8, 9&10, 11-13, 14

All Girls: 7-9, 10-12, & 13-17

Select: 10U, 12U, 14U, 16U



**Select Division:** This new division will be a part of a YMCA of Greensboro League. This division will allow coaches to bring in their own team. Select coaches are asked to collect all forms and fees and submit prior to deadline. Rosters may not be changed after the first game. The age groups offered will be **10 & under**, **12 & under**, **14 & under**, and **16 & under**. We reserve the right to request official proof of age from any participant. There will be evaluation for the select division on November 14, 2009 at the Bryan Family YMCA.

## Registration Deadline\* November 14, 2009

**Cost:** \$55 YMCA Members or \$80 Non-YMCA Members

\*Early Bird \$10 discount if you register before November 1, 2009

\*A \$10 late registration fee will be applied to all registrations submitted after the deadline

\*Multiple registrations are required to play on more than one team

**YMCA Philosophy:** The Greensboro YMCA believes that youth and their families can benefit from participation in sports where emphasis is placed on fun, fitness, and fair play. Under the guidance of dedicated staff and volunteer leadership, the goal is to provide a quality experience that will not only develop individual athletic skill, but Christian values, self-esteem, and an understanding that there are many ways to win. All sport activities are open to boys and girls. We hope the program will provide a learning experience for all participants based on the practice of **“athletes first, winning second”**.

**Financial Assistance:** The goal of the YMCA of Greensboro is to turn no one away due to inability to pay. Financial Assistance is available through our Open Doors Program. For more information, please stop by our front desk to pick up an application. You may also contact us at 272-2131 or download an application from our website at [www.hayestaylorymca.org](http://www.hayestaylorymca.org). Financial assistance applications and any payment arrangements for this program must be received prior to the start of practices. Applications received after this date may not be processed.

**Our Mission:** To put Judeo-Christian principles into practice through programs that build a healthy spirit, mind, and body for all.

# YOUTH SPORTS REGISTRATION FORM GREENSBORO YMCA

**\*\* PLEASE FILL OUT A SEPARATE FORM FOR EACH CHILD IN THE FAMILY \*\***

Age Group\*: \_\_\_\_\_ \*Child must be within age group as of 2/27/2010

Member or Non-member      Gender: \_\_\_\_\_      Age: \_\_\_\_\_      Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_

## PLAYER INFORMATION

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

School Child Attends \_\_\_\_\_ Grade: \_\_\_\_\_ First Time Participant? \_\_\_\_\_

**T-Shirt Size:** *Youth* YS (6-8)\_\_\_ YM (10-12)\_\_\_ YL (14-16)\_\_\_ *Adult* AS\_\_\_ AM\_\_\_ AL\_\_\_ AXL\_\_\_ AXXL\_\_\_

## EMERGENCY PHONE INFORMATION

Father's Name \_\_\_\_\_ Home \_\_\_\_\_ Work \_\_\_\_\_ Ext. \_\_\_\_\_

Cell Phone \_\_\_\_\_ E-mail: \_\_\_\_\_

Mother's Name \_\_\_\_\_ Home \_\_\_\_\_ Work \_\_\_\_\_ Ext. \_\_\_\_\_

Cell Phone \_\_\_\_\_ E-mail: \_\_\_\_\_

## REQUESTS\*:

**\*NOTE: The Youth Sports Staff will attempt to place your child according to your preference; however, due to the number of participants, we cannot guarantee preferred placement.**

Last year's Coach/Team \_\_\_\_\_ Coach/Team Requested \_\_\_\_\_ *1st priority* Coach \_\_\_ Player \_\_\_ Day \_\_\_

Night/Time **Unable** to Practice \_\_\_\_\_ Player Preference (one child only) \_\_\_\_\_

**\*\*\*\*I am willing to participate as a volunteer in support of this program as a (CHECK ALL THAT APPLY)**

Coach \_\_\_ Assistant Coach \_\_\_ Team Parent \_\_\_ Scorekeeper \_\_\_ Other \_\_\_

THIS IS YOUR RELEASE AND WAIVER OF LIABILITY (the "Release"). You individually and/or on behalf of any minor child, release the YMCA of Greensboro, Inc., its officers, directors, board members, employees, volunteers, agents, independent contractors, other participants and/or others acting on its behalf (collectively, "YMCA"). You agree that this Release is effective immediately. This is important to you and/or any minor children, so do not sign until you have had your questions answered. You provide this Release freely, and without duress under the following terms:

1) GENERAL RELEASE: I hereby agree for myself and/or my child and our respective heirs, assigns and legal representatives, to indemnify, defend and hold YMCA and its officers, directors, board members, employees, volunteers, agents, independent contractors and other participants ("Releases") in the program harmless from any and all claim and causes of action of any nature for any and all personal injury or illness, including death, which may occur to me and/or my child or which may be aggravated during or by any activity during the course of the program in which I have decide to allow myself and/or my child to engage. I further waive any and all claims or causes of action, which I and/or my child may now or hereafter have against Releases which may at any time arise as a result of any act or thing occurring in or arising out of my and/or my child's participation in the program. I further expressly understand and agree the foregoing indemnity, release and waiver is intended to be as broad and inclusive as permitted by the law of the State of North Carolina and that any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full force and effect.

2) ASSUMPTION OF RISK: I, individually and/or on behalf of any minor child, expressly and specifically assume any and all risk of injury, illness, death, or property damage resulting from my YMCA activities. You assume the risks: I, individually and on behalf of my minor child, understand that YMCA activities are strenuous and dangerous and should be engaged in only by persons in good health. I understand that I should consult a physician before enrolling myself and/or my child in the YMCA program. Once you sign, you are saying that you understand the risks involved and accept all of the risks.

3) MEDICAL RELEASE: I, individually and/or on behalf of any minor child, further hereby release YMCA from any claim whatsoever which may arise as a result of any first aid, treatment, or services or assistance provided to me in connection with any injury that arises from activities at YMCA. A) I take full responsibility for my and my child(s) welfare and safety on or at YMCA activities. B) I hereby give permission for emergency medical treatment to be administered as deemed appropriate.

4) INSURANCE: YOU ARE EXPECTED TO HAVE YOUR OWN HEALTH INSURANCE. You should understand that the YMCA does not carry insurance to cover injuries and losses that may befall you.

5) PHOTOGRAPHIC RELEASE: I consent to be photographed and to allow YMCA's use of any photos of myself and/or my minor child at its sole discretion.

6) The YMCA reserves the right to request a birth certificate for verification purposes

HAVING READ, UNDERSTOOD, AND AGREED WITH THESE TERMS, I HAVE EXECUTED THIS RELEASE, TO BE EFFECTIVE IMMEDIATELY.

**Applicant or Parent/Legal Guardian Signature**

\_\_\_\_\_ **Date** \_\_\_\_\_