

REGISTRATION DEADLINE AUGUST 23, 2010



# YMCA Flag Football 2010 Registration Form

**REGISTRATION DEADLINE:** August 23, 2010

**SEASON BEGINS:** Season begins in September

Categories for play are:

1<sup>st</sup> & 2<sup>nd</sup> grade

3<sup>rd</sup> & 4<sup>th</sup> grade

5<sup>th</sup> & 6<sup>th</sup> grade



Games will be played on weeknights and some Saturdays depending on the number of teams.

**FEE:** \$27.00 (Includes T-shirt)

**NO PHYSICAL REQUIRED**

**VOLUNTEER COACHES NEEDED. PLEASE CALL THE YMCA AT 762-4780**

**\$5.00 late fee if not turned in by the August 23<sup>rd</sup> deadline**

CHILDS NAME: \_\_\_\_\_ Male Female PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

AGE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_ GRADE: \_\_\_\_\_ SCHOOL: \_\_\_\_\_  
If in 6th grade, put elementary school you attended last year

SHIRT SIZE: Youth Medium Youth Large  
Adult Small Adult Medium Adult Large X-Large

Pd	W
Recp.	_____
Name	_____

The Junction City Family YMCA **does not** provide medical or accident insurance for any youth programs. It is the responsibility of the participant's parents or legal guardian to provide such insurance if desired. In consideration of my acceptance in these programs, I do, release and forever discharge, the Junction City Family YMCA, its officers, employees and agents, and its successors and assigns from any and all claims of demands which I may have or might have at any time now or in the future, arising or resulting directly from my child's participation in these programs, including but not limited to any illness, injury, or occurrence arising there from. Furthermore, I declare my child to be in good medical condition for the participation in the above program. It is the Junction City Family YMCA's policy that all children wanting to participate in any YMCA sport program and can't afford to pay the fee, the YMCA will waive the fee. A \$5.00 processing fee is charged for any refund.

PRINT PARENT OR GUARDIAN NAME: \_\_\_\_\_

SIGNATURE OF PARENT OR GUARDIAN: \_\_\_\_\_

RELATIONSHIP TO PARTICIPANT: \_\_\_\_\_ DATE: \_\_\_\_\_

E-MAIL ADDRESS OF PARENT OR GUARDIAN: \_\_\_\_\_

## Coaching Information

I am interested in becoming a Volunteer Coach Yes or No If yes, please indicate what grade level \_\_\_\_\_

Name \_\_\_\_\_ Phone: \_\_\_\_\_

**Please Return Form to:**

Junction City Family YMCA  
1703 McFarland Road  
Junction City, 66441  
Phone: (785) 762-4780



We build strong kids, strong families, strong communities.