

PROGRAM COSTS & REGISTRATION:

Please read the enclosed information regarding age groups and divisions. Complete the registration form on the reverse side and submit it to the Mary Perry Ragsdale YMCA branche with the proper registration fee either by mail or in person. All fees must accompany registration forms, for child to be registered in the program. The registration deadline is **Friday, March 12, 2010**. **There will be a \$10 late fee applied to all registrations RECEIVED after the deadline. Please remember that an age group may be closed prior to the deadline, so register as early as you can.** If you wish to mail the registration form in, you may mail it to:

Mary Perry Ragsdale YMCA
900 Bonner Drive
Jamestown NC, 27282

Please make checks payable to: YMCA

PROGRAM COSTS:

\$40 YMCA Members \$65 Non-Members
Please note there is a \$5 discount on
additional
children in the same family.

Please Note: Financial Assistance is available upon request. If you wish to apply for financial assistance, please notify the YMCA office and complete the scholarship application and submit this application along with current income verification prior to or at the time you are registering your child(ren).

Check out our website at
www.ymcagreensboro.org

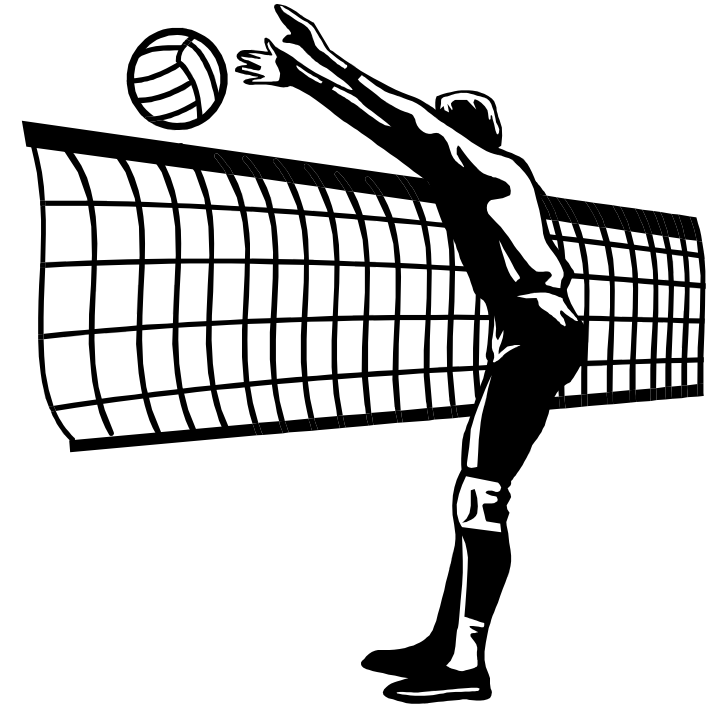
Our Mission: To put Judeo-Christian principles into practice through programs that build a healthy spirit, mind, and body for all.



YMCAs of Greensboro, Inc
900 Bonner Drive
Jamestown, NC 27282

**YMCA of Greensboro Presents
2010 Girls Youth
Volleyball League**

Age Groups:
4th-5th Grade
6th-8th Grade



**Athletes First,
Winning Second.**

NON-PROFIT ORG.
U.S. POSTAGE PAID
GREENSBORO, NC
Permit No. 241

**YMCA of Greensboro, Inc. Youth Sports
Registration and Parent/Guardian Waver & Permission**

Must be within age group as May 31st, 2010

Grade: _____ **Weight:** _____ **YMCA Member / Non-Member:** _____ **YMCA Branch:** _____
Height: _____ **DOB** ____ / ____ / ____ **Age:** _____ **Phone:** _____
Child's Name: _____ **City:** _____ **State:** _____ **Zip Code:** _____ **Gender:** M / F
Address: _____
Name(s) of Parent(s) / Guardian(s): _____
Mother: _____ (HPhone) _____ (WPhone) _____ (C/P) _____
Father: _____ (HPhone) _____ (WPhone) _____ (C/P) _____

Please indicate T-Shirt Size: (Circle One) YM YL AS AM AL AXL

Note: The youth sports staff will attempt to place your child according to your preference; however, due to the large number of participants, we cannot guarantee preferred placement. Also, all special requests must be made at the time of registration to be honored!
 First Time Participant? _____ If no, number of previous seasons as a participant in this sport: _____

Teammate Requested (one choice only): _____ Any Night/Time You Cannot Practice: _____
 1st Priority (one choice only, please indicate): Player: _____ Night/Time _____

RELEASE AND WAIVER OF LEGAL LIABILITY

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:

- 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 ("Release") 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 in valid, it is agreed that the balance shall, notwithstanding, continue in full force and effect.
- 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.
- 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.
- INSURANCE: YOU ARE EXPECTED TO HAVE YOUR OWN HEALTH INSURANCE.** You should understand that the YMC does not carry insurance to cover injuries and losses that may befall you.
- 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.

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

Applicant or Parent/Legal Guardian Signature _____ Date _____

I am willing to participate as a volunteer in support of this program as a (check one or more):

Coach _____ **Assistant Coach** _____ **Referee/Umpre** _____ **Scorekeeper** _____ **Other** _____



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.*

Approximate Season Schedule

**Season: Practices Begin 3/22/10.
Games Begin on 4/3/10
Tournament will start 6/1/2010**

**Season will end approximately
Early June, 2010**

All Age Groups will have 1-2 Weeknight Practice and Games will be played on Saturday.

Games will be played between the Ragsdale YMCA and the Spears YMCA.

All practices will be held at the Mary Perry Ragsdale YMCA

