

PROGRAM COSTS & REGISTRATION:

Please read the enclosed information regarding age groups, divisions, and registration dates. Complete the registration form on the reverse side and submit it to the Ragsdale Family YMCA from (Monday - Thursday 5:30 am - 8:00 pm, Friday 5:30 am - 7:00 pm, Saturday 7:00 am - 7:00 pm and Sunday 1:00 am - 7:00 pm). All fees must accompany registration forms for child to be registered in the program.

Ragsdale Family YMCA
900 Bonner Drive
Jamestown, NC 27282

Please make checks payable to: YMCA

Registration deadline is February 17, 2012.

PROGRAM COSTS:

\$60 YMCA Members \$85 Non-Members

\$5 Early Bird Discount if you register before 2/1/12.

Please note there is a \$5 discount on additional children in the same family. There will be a \$10 late fee per application applied to all registrations received after the deadline.

The YMCA reserves the right to request a birth certificate for age verification purposes.

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 at the time you are registering your child(ren).

Non-Profit Org.
US Postage
PAID
Greensboro, NC
Permit No. 241

YMCA of Greensboro
620 Green Valley Road, Ste. 210
Greensboro, NC 27408

Ragsdale Family YMCA
336 882 9622
ragsdaleymca.org



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

RAGSDALE FAMILY YMCA

VOLLEYBALL

6th-8th Grade



ATHLETES FIRST
WINNING SECOND

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

If you have any questions, please call or email
Carlos Jordan at 882 9622 or
carlos.jordan@ymcagreensboro.org

Ragsdale Family YMCA 2012 Spring Sports Registration

Registration and Parent/Guardian Waiver & Permission

Must be within age group as of 5/21/12

Age Group: _____ Volleyball Y Member Non-Member

Child's Name: _____ DOB ____/____/____ Age: _____

Address: _____ City: _____ State: _____ Zip Code: _____ Gender: M / F

Email: _____ Grade: _____

Name(s) of Parent(s) / Guardian(s): _____

Mother: _____ (HPhone) _____ (WPhone) _____ (C/P) _____

Father: _____ (HPhone) _____ (WPhone) _____ (C/P) _____

Please indicate T-shirt Size: (Circle One) **YS** **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 request must be made at time of registration to be honored.

Coach / Team Played Last Year: _____ Coach / Team Requested This Year: _____

Teammate Requested (one choice only): _____ Any Night Cannot Practice _____

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:

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 ("Release") in the program harmless from any and all claim and causes of action of any nature for 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 decided 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.

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.

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/Umpire _____ 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 also 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.**

VOLLEYBALL

6th-8th Grade

Games will be played at the Ragsdale Family YMCA.

All practices will be held at the Ragsdale Family YMCA.

Season will mid-March through mid-May

Practices begin week of March 12, 2012.

Volleyball practices will either be on Mondays, Tuesdays or Thursdays. The day you practice will be up to the coaches discretion.

Games begin week of March 24, 2012



If you have any questions regarding the program, please do not hesitate to call Carlos Jordan at 882-9622 or email him at atcarlos.jordan@ymcagreensboro.org