



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

YMCA USE ONLY			
Registration taken by _____	Payment \$ _____		
CK	CASH	CHG	Entered in by: _____

# YMCA OF THE COASTAL BEND

## Fall 2018 Youth Recreational Pre-TBall

**Code: FALL18**

**All Fees (including Late Fee) are Non-Refundable/Non-Transferable**

**Please be sure all information below is correct and filled out completely, as the YMCA is not held responsible for any incorrect, or missing information on registration form.**

**Section I: (Ages 3-5) (PLEASE PRINT CLEARLY)**

PARTICIPANT'S NAME \_\_\_\_\_ M \_\_\_ F \_\_\_ DOB \_\_\_ / \_\_\_ / \_\_\_ AGE (as of 9/8/18) \_\_\_\_\_

ADDRESS \_\_\_\_\_ City \_\_\_\_\_ ZIP CODE \_\_\_\_\_

DIVISION (Please circle preferred age division. Players can only play UP one age division) N/A GRADE \_\_\_\_\_ SCHOOL \_\_\_\_\_

Rate Childs Ability amongst peers: 1(advanced) 2(high) 3(neutral) 4(Beginner) **UNIFORM SIZE** YS YM YL AS AM AL AXL

*(Optional/please circle one)*

RACE American Indian/Alaskan Native, Asian, Black/African American, Hisp./Latino, Native Hawaiian/Pacific Islander, White/Caucasian, 2/More Races, Other

INCOME LEVEL Under \$15,000, \$15-\$34,999, \$35-\$54,999, \$55-\$74,999, \$75-\$100,000, Over \$100,000

**Section II: REQUESTS- Requests are not 100% guaranteed; We will try our best!**

COACHES REQUEST \_\_\_\_\_ SIBLING REQUEST \_\_\_\_\_ ANY OTHER \_\_\_\_\_

Bringing in a team? Each team will only get 5 requests (including their child); the YMCA will add all other players. You may have more than one team.

**Section III: CONTACT INFORMATION**

1<sup>st</sup> Contact NAME & Relationship \_\_\_\_\_ 2<sup>nd</sup> Contact Name & Relationship \_\_\_\_\_

PHONE (1<sup>st</sup> Contact) \_\_\_\_\_ PHONE (2<sup>nd</sup> Contact) \_\_\_\_\_

EMAIL(1<sup>st</sup> Contact) \_\_\_\_\_ EMAIL(2<sup>nd</sup> Contact) \_\_\_\_\_

**Section IV: VOLUNTEERS ARE ALWAYS NEEDED! (Please circle one): Head Coach / Asst. Coach / Referee**

NAME \_\_\_\_\_ Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

Preferred practice time and day (Head Coach only) \_\_\_\_\_

In consideration for allowing my child to participate in the YMCA's League(s), I understand and authorize the Association, to allow my child to participate and to transport (n case of an emergency) my child to and from activities offered by the Association. In addition, the signing of this permission slip releases and indemnifies the "Association" and it's agents and/or employees from all liabilities, damages and any claims made by the child or on behalf of the child, including medical expenses incurred, should serious injury, loss of property, damages or death occur as a result of his/her participation in the participation and transportation in any program. We fully understand the nature of child care, sports, recreation and transportation services and the risk of serious injury, loss of property, damages or death associated with these services.

1. THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the "Association", its directors, officers, employees, and agents (hereinafter referred to as "releases") from all liability to the undersigned, his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releases or otherwise while the undersigned is in, upon, or about the premises or any facilities or equipment therein, or participating in any program affiliated with the YMCA, without respect to location.

2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releases and each of them from any loss, liability, damage, or cost they may incur due to the presence of the undersigned in, upon, or about the YMCA Association premises or in any way observing or using any facilities or equipment of the Association or participating in any program affiliated with the Association whether caused by the negligence of the releases or otherwise.

3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE due to negligence of releases or otherwise while in, about, or upon the premises of the YMCA Association and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the Association.

4. THE UNDERSIGNED HEREBY PERMITS THE YMCA, KRIS, KIII, KZTV, KORO, the Caller Times, the Corpus Christi Daily and other media outlets to make and use photographic likeness of myself, in a still or video commercial, to be exhibited by television broadcasting and/or the internet at the said media stations. The material will be used for news and/or YMCA purposes. It will also be utilized in YMCA print materials, and any forms of media release, and or video produced to help the YMCA.

THE UNDERSIGNED further expressly agrees that the forgoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements, or inducement apart from the foregoing written agreement have been made.

**I HAVE READ THIS RELEASE**

\_\_\_\_\_  
Parent/Guardian Signature #1 Date

\_\_\_\_\_  
Parent/Guardian Signature #2 Date

**If you have not received contact from a coach the week prior to games starting, please contact us ASAP. We will not be responsible if you delay in notifying us of the issue after games have already started.**