



# Youth Sports — Spring 2012

## YMCA of Austin — Spring Family YMCA

### Registration Fees:

Early Discount:  
\$35M / \$75NM

Regular:  
\$55M / \$95NM

### Financial Assistance

“YMCA of Austin programs and activities are designed to benefit persons of all backgrounds, and fees are based on the cost of providing each program. While participants are expected to pay their fair share, when financial assistance dollars are available, the YMCA will assist any individual or family that wants to participate but cannot afford the fee.”

### Springs Family YMCA

27216 Ranch Road 12  
Dripping Springs, TX, 78620  
Phone: 512 894-3309  
Fax: 512 858-1789  
Email: ian.manzak@austinyymca.org

### Youth Soccer

**Ages:** 4-12 years old (divisions listed below)

**Registration Dates:** Early: Jan. 3rd – Feb. 6<sup>th</sup>  
Regular: Feb. 7<sup>th</sup> – Feb. 27<sup>th</sup>

\*\*Registrations will only be accepted after the registration deadline, if open spots remain and with the approval of the Youth Sports department.

**Season Dates:** March 24<sup>th</sup> – May 19<sup>th</sup>  
No games on April 7th Easter weekend  
Bad Weather Make-up day 5/26

### Helpful Information

- Confirmations will be emailed upon the completion of the late registration period. Please contact the Youth and Family department if you do not receive one.
- All games are played Saturday mornings at The Springs Family YMCA.
- All Y Youth Sports teams are supported and coached by volunteers.

## Youth Sports Registration Form

### Please check Sport/Division

#### Fall Soccer

- 4-5 yrs old (Coed)
- 6-7 yrs old (Coed)
- 8-9 yrs old (Coed)
- 10-12 yrs old (Coed)

Current YMCA of Austin member? Y N Member # \_\_\_\_\_

Child's Name \_\_\_\_\_ Gender M F DOB \_\_\_\_\_ Age \_\_\_\_\_

Parent Name \_\_\_\_\_ Primary# \_\_\_\_\_

E-mail \_\_\_\_\_

*\*The YMCA of Austin will be utilizing a **NEW** jersey design this season. All participants will receive one.*

Youth Small  Youth Medium  Youth Large

Adult Small  Adult Medium  Adult Large

Child's Previous Soccer Experience (Circle):

1 2 3 4 5

None Moderate Extensive

I would like to volunteer to coach (name) \_\_\_\_\_

If volunteering, What is your shirt size: S M L XL 2XL

I would like my child to be coached by (name) \_\_\_\_\_

I would like my child and (friend's name) \_\_\_\_\_ to be on the same team.

### Mail or return form and fee to:

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Dripping Springs, TX, 78620  
Phone: 512 894-3309  
Fax: 512 858-1789



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### Youth Soccer

#### YMCA Youth Sports Pledge

I pledge to play the game,  
The best that I can,  
To be a team player,  
To respect my opponents,  
The rules and officials,  
And to improve myself in  
Spirit, mind and body.

*The mission of the YMCA of Austin is to put Christian Principles into practice through programs that build a healthy spirit, mind and body for all.*

#### Additional Information

- All 4-5 yr old and 6-7 yr old division teams will have a "Meet and Greet" on the first game scheduled, 9/24. **All other division teams will meet at their scheduled practice times (No separate "Meet and Greet" time).**
- All 8-9 and 10-12 yr old division teams will begin practice the week of 3/24. Each team is allowed to have one, 1-hr practice a week at a local of the coaches' choice. Exact day and time to be determined and relayed by coach. Get with Ian Manzak to schedule use of the facility.
- 4-5 yr olds and 6-7 yr old division teams will have practice during the initial part of the scheduled hour each Saturday prior to playing their game. Additional practice for this group is allowed and cannot exceed one, 1-hr practice a week.
- Jerseys will be distributed to participants at the team's "Meet and Greet" or first practice.
- Will be OUTDOOR SOCCER (In the Fall we do indoor soccer.)

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#### Office Use Only

Membership # \_\_\_\_\_

Receipt # \_\_\_\_\_

Date Entered \_\_\_\_\_

Staff Name \_\_\_\_\_

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Dripping Springs, TX, 78620  
Phone: 512 894-3309  
Fax: 512 858-1789

### Youth Sports Payment Form

**CREDIT/DEBIT CARD (Circle one):** Visa Mastercard Amex Discover

Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_ / \_\_\_\_\_

Signature \_\_\_\_\_

- Refunds are available upon request 10 business days prior to the beginning of the season. A YMCA System Credit is available on all other cancellations.

THE YMCA DOES NOT PROVIDE ACCIDENT/MEDICAL INSURANCE FOR PROGRAM PARTICIPANTS.

\*THE FOLLOWING RELEASE FORM MUST BE SIGNED IN ORDER TO PARTICIPATE.

I grant the YMCA and its agents permission to transport my child in the event of an emergency when I am unable to be contacted. I recognize that participation in the YMCA activities may expose my child to some risk of injury. I agree to hold the YMCA harmless from any claims for damage to any property or injury to persons which may occur through participation in any activity at the YMCA or in its programs at an outside facility. I also authorize the use of any photographic image of my child, named herein, taken during Y Youth Sports, for use in any YMCA publication. I further agree to abide by all YMCA of Austin procedures and policies. I have read and understand the above information. My child has permission to participate in this YMCA Youth Sports program with the conditions set forth.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date