



YOUTH SPORTS—SPRING 2012

YMCA of Austin—North Park Branch

Registration Fees:

Early: \$30(M)/\$60 (NM)
Reg.: \$50(M)/\$80(NM)

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 the 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.

YOUTH SOCCER

Ages: 4-8 years old

Registration Dates:

Early: Jan. 16-Feb. 5
Regular: Feb. 6-Feb. 26

Season Dates: Mar. 24-May 12

Helpful Information for Parents:

- Participants will be contacted by their coach by March 21, 2012.
- All practices/games will be played at location in the vicinity of the North Park Y and will be played on Saturdays.
- All Y sports are supported and coached by volunteers. If you are interested in coaching, please contact Jayme Lamm, Program Coordinator at npaquatics@austinyymca.org.
- First 3 weeks will be practices; last 5 weeks will be games.
- **INFORMATION WILL BE PROVIDED PRIMARILY BY EMAIL. PLEASE PROVIDE YOUR EMAIL ADDRESS.**

Please select division:

**Kinder (4-6)
8 & Under (7-8)**

Mail/Return Form and Fee to:
North Park YMCA
Youth Sports
9616 N. Lamar Blvd
Ste. 130
Austin, TX 78753

YOUTH SPORTS REGISTRATION FORM

Child's Name: _____ Gender: M F
Address: _____
Zip: _____
Child's Age (on Mar. 24): _____
Parent Name: _____
Primary #: _____
Secondary #: _____
Emergency Contact: _____
Emergency #: _____
Email (required): _____
Child's Jersey Size: YXS YS YM YL YXL AS AM AL

I would like more info on coaching: Y N
I would like more information on coaching: Y N
I would like my child to be coached by: _____
I would like my child to on the same team as: _____



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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 improve myself
In spirit, mind and body

YMCA MISSION STATEMENT

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:

- Players are required to wear shin guards. Cleats are optional, though they are recommended.
- Jerseys will be provided at the first day of games.
- Athletic shoes and athletic shorts are required. Any color is suitable.
- Teams will be coached by YMCA volunteers.
- Communication regarding practices, games, schedule changes, etc. will come primarily from volunteer coaches and team managers.
- If there are not enough participants registered in a specific age division, divisions may be combined.
- Please detach the top part of this form for your file and return bottom half to the North Park YMCA fully completed.

Office Use Only

Membership # _____

Receipt # _____

Date Entered _____

Staff Name _____

Release Form Signed?
Y N

Mail or return form and fees to:

North Park YMCA
9616 N. Lamar
Ste. 130
Austin, TX 78753
Fax: (512)491-0909

YOUTH SPORTS PAYMENT FORM

Credit/Debit Card (Please circle one.):

Visa MC Amex Discover
Card # _____ Exp 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 MUST be signed in order to participate.

I grant the YMCA or its agent's 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 risks 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 _____