

REGISTRATION FORM cont.

Participant 1 Name: _____

Home Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Birthdate: _____ Grade: _____

Adult t-shirt Size: (circle one) S, M, L or XL

Parent/Guardian Signature:

Participant 2 Name: _____

Home Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Birthdate: _____ Grade: _____

Adult t-shirt Size: (circle one) S, M, L or XL

Parent/Guardian Signature:

Participant 3 Name: _____

Home Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Birthdate: _____ Grade: _____

Adult t-shirt Size: (circle one) S, M, L or XL

Parent/Guardian Signature:

Participant 4 Name: _____

Home Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Birthdate: _____ Grade: _____

Adult t-shirt Size: (circle one) S, M, L or XL

Parent/Guardian Signature:



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

The La Crosse Area Family YMCA is a membership organization that is accessible to all people. Financial assistance is offered to individuals and families who cannot afford membership. Joining the Y means being part of a community- one that fosters relationships, and strengthens your spirit, mind and body.

With a focus on developing the potential of kids, improving health and well-being, and giving back and supporting our neighbors, your membership will not just bring about meaningful change in yourself, but in your community too.

Among our offerings:

- * Child Care and Education
- * Health, Well-being and Fitness
- * Swim, Sports and Play
- * Volunteerism

The Y's Mission: To put Christian principles into practice through programs that build a healthy spirit, mind and body for all.

The Y's Cause: At the Y, strengthening community is our cause. Every day, the Y works side by side with our neighbors to ensure that everyone, regardless of age, income or background, has the opportunity to learn, grow and thrive.

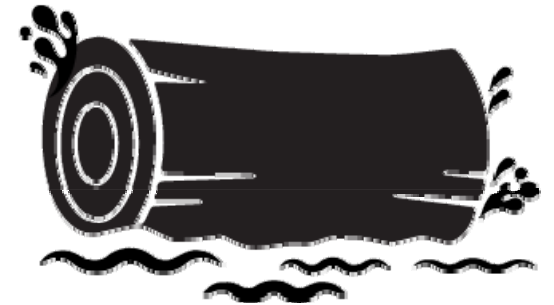
The Y, founded in 1883, is one of La Crosse's leading 501(c)(3) nonprofits, committed to strengthening our community in the areas of youth development, healthy living and social responsibility.



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

MAKE A SPLASH!

Rusty Ankle Logrolling Tournament



Sunday, May 6, 2012
12:00pm Warm ups

WHO?

Rusty Ankle is open to all amateur log rollers. All skill levels are welcome to participate. The log will be held for starters.

WHAT?

An afternoon of fun which consists of a double-elimination tournament

WHERE?

YMCA-La Crosse Branch
1140 Main Street
La Crosse, WI 54601

WHEN?

Sunday May 6, 2012
Warm-ups start at 12pm (noon)

OTHER COOL STUFF!

Awards given at the end of the competition.

ENTRY FEE

YMCA Member: \$25
Community Participant \$30
(\$5 extra for late registration, after May 2)

BRACKETS:

Age as of January 1, 2012
Girls: 8-10 11-13
Boys 8-10 11-13
Co-ed: 7 & under 14-17 Novice Adult

TO REGISTER:

RETURN FORM AND PAYMENT TO
YMCA-La Crosse Branch
By Monday, April 30, 2012

CONTACT:

Contact Brenda Maxwell at 782-9622 ext. 222 or
bmaxwell@laxymca.org.

INTERESTED IN VOLUNTEERING?

Yes I am willing to volunteer in:
(Please circle one and enclose with waiver)

- Registration
- Running Scores to Judges
- Handing out Awards
- Putting together Snack Bags
- Anything available
- Set Up on Sunday Morning
- Take Down on Sunday Night

LODGING:

For hotel/motel information or other
La Crosse attractions, please visit:

www.explorelacrosse.com
or www.lacrossevisitor.com

REGISTRATION FORM

Payment Information:

Cash Check Charge

Check #: _____

Charge #: _____

Charge Card Expiration Date: _____

3-4 digit security # in signature block: _____

Name on card: _____

WAIVER

I grant permission for the children listed on the back of this form to participate in the Rusty Ankle Logrolling Tournament. I waive and release any and all claims for injuries or losses due to my participation in this event against the La Crosse Area Family YMCA. Participant listed below is of normal health and capable of safe participation in these events.

Name: _____

Date: _____

Phone Number: _____

Address: _____

City: _____ State: ____ ZIP: _____

E-mail Address: _____

Parent/Guardian Signature: _____

Complete information for each participant on the reverse side.

PLEASE ENCLOSE WITH FEE AND SEND TO:
La Crosse Area Family YMCA
Attn: Brenda Maxwell, Aquatics Director
1140 Main Street, La Crosse, WI 54601