

PARKER YMCA FLAG FOOTBALL



for Children and Adults

www.pelsueorthodontics.com

AGES 4-6 COED

Early Registration: NOW - August 10th
Late Registration (\$10 T-shirts): 8/11 - 8/18
Coaches Meeting: August 19th at 6pm (DT YMCA)
Season Begins: August 31st (Games/Practices will be Tuesdays and Wednesdays.)
(Approx. Game Time 5-8 pm)

Registration Fee:

(T-shirt included w/early registration) \$32 Member \$62 Non-member

GENERAL INFORMATION:

- The goal of this program is to help the participants learn basic football fundamentals and skills, build coordination, gain confidence, develop a concept of teamwork and fair play all while having fun!
- Not only will your child learn to develop physical skills, but he or she will develop lifetime skills and values such as Respect, Responsibility, Caring & Honesty.
- Games will be held at the Mercy Sports Complex at the Parker YMCA.
- Coaches will inform players of practice and game times after coaches meeting.
- All games and practices will meet every Tuesday and Wednesday.
- Shirts will be distributed by the first game.

For More Information Contact Kristy Roherty (608) 754-9622 ext. 114 or kroherty@ymcajanesville.org

YMCA OF NORTHERN ROCK COUNTY

Downtown Janesville - 608.754.YMCA - 221 Dodge St. Janesville, WI 53548 Parker - 608.868.YMCA - 1360 Parkview Dr. Milton, WI 53563 www.ymcajanesville.org

Flag Football Registration Form—One Form Per Person Register by mail, in person or fax credit card information to 608-754-9024 attention Kristy Roherty.

| | Phone: | 15FAL-4YSF |
|---|---|---|
| WOULD BE WILLING TO VOLUNTEER AS A: Coach Assistant Official | | AMOUNT ENCLOSED |
| | | Signature |
| eceived during late registration periods. | | 3-Digit Verification Code (on back of card) |
| • | ed. Special Requests cannot be honored if registration is | |
| you would like to be placed with a specific coach or on a specific team please let us | | Expiration Date |
| HIRT SIZE: Child S Chil | d M Child L Adult S Adult M Adult L Adult XL | Card # |
| Member | | Name on Card |
| | State: Zip: | ☐ Discover ☐ Visa ☐ Master Card |
| ddress: | | ☐ Check # |
| mail Address: | | □ Chock # |
| ather's Name: | Cell Phone: | ☐ Cash (in person only) |
| | Cell Phone: | Payment Method |
| | | |
| rade: Age: | Birth Date: | |
| | | |
| hild's Name: | M / F | |