



RAGSDALE FAMILY YMCA • 2015 Fall Sports

900 Bonner Drive, Jamestown • 336 882 9622 • www.ragsdaleymca.org

THE YMCA YOUTH SPORTS PHILOSOPHY

The YMCA of Greensboro believes that youth and their families can benefit from participation in sports where emphasis is placed on fun, fitness, and fair play. Under the guidance of dedicated staff and volunteer leadership the goal is to provide a quality experience that will not only develop individual athletic skill, but Christian values, self-esteem, and an understanding that there are many ways to win. All sport activities are open to boys and girls. We hope the program will provide a learning experience for all participants based on the practice of **Athletes First, Winning Second.**

SOCCER

Kiddie Kickers: Ages 3-4 and 5-6

Emphasis: The very basic fundamentals of soccer on a scaled down field with fewer players per team. Limited to the first 80 registrants per age group.



Soccer Strikers: Ages 7-9, 10-11

Emphasis: Learning fundamentals of soccer on a scaled-down field with fewer players per team. Limited to the first 80 participants per age group.

FLAG FOOTBALL

Age Divisions: 5-6, 7-8, 9-11

Games and practices will be held at the Jamestown Athletic Complex on East Fork Road.



If you have any questions, please contact Carlos Jordan at 336 882 9622 ext 240 or carlos.jordan@ymcagreensboro.org

Fall Youth Sports Season Information:

Practices begin week of September 7, 2015
Games begin week of September 19, 2015
Season will end late October/early November

DEADLINES:

Financial Assistance Closes: August 9, 2015

FALL SPORTS REGISTRATION FEES	MEMBER	NON-MEMBER
EARLY BIRD: Now thru August 2 nd	\$60	\$85
REGULAR: August 3 rd - 24 th	\$80	\$105
LAST CHANCE: After August 24 th	\$85	\$110
A \$5 discount on additional children in the same family.		

PROGRAM REGISTRATION FOR FALL SPORTS:

Please read the enclosed information regarding session dates and times. Complete the registration form on the reverse side and submit it to the Ragsdale Family YMCA (5:00 a.m.-10:00 p.m. Mon.-Thur., 5:00a.m.-8:00 p.m. Friday, 7:00 a.m.-7:00 p.m. Saturday and 1:00-6:00 p.m. Sunday). All fees must accompany registration, for child to be registered in program. Please make checks payable to YMCA. If you wish to mail the registration form in, you may mail it to:

Mary Perry Ragsdale Family YMCA • 900 Bonner Drive • Jamestown, NC 27282

**For more information
visit ragsdaleymca.org**



**FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

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

RAGSDALE FAMILY YMCA FALL YOUTH SPORTS REGISTRATION FORM

* Must be within age group as of 10/1/15

SPORT: (Please circle one) Soccer Flag Football

Age Group: _____

Member Non-Member Gender: M / F

Name: _____ DOB ____/____/____ Age: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Email: _____

Emergency Information:

Mother: _____ (H) _____ (W) _____ (C/P) _____

Father: _____ (H) _____ (W) _____ (C/P) _____

Please indicate T-Shirt Size: (Circle One) YS YM YL AS AM AL AXL

Note: The youth sports staff will attempt to place your child according to your preference; however, due to the large number of participants, we cannot guarantee preferred placement. Also, all special requests must be made at the time of registration to be honored!

Coach Played For Last Year: _____ Night/Time You Cannot Practice: _____

Teammate Requested (one choice only): _____ 1st Priority: Coach _____ Player: _____ Night/Time _____

RELEASE AND WAIVER OF LEGAL LIABILITY

THIS IS YOUR RELEASE AND WAIVER OF LIABILITY (the "Release"). You individually and/or on behalf of any minor child, release the YMCA of Greensboro, Inc., its officers, directors, board members, employees, volunteers, agents, independent contractors, other participants and/or others acting on its behalf (collectively, "YMCA"). You agree that this Release is effective immediately. This is important to you and/or any minor children, so do not sign until you have had your questions answered. You provide this Release freely, and without duress under the following terms:

1) **GENERAL RELEASE:** I hereby agree for myself and/or my child and our respective heirs, assigns and legal representatives, to indemnify, defend and hold YMCA and its officers, directors, board members, employees, volunteers, agents, independent contractors and other participants ("Release") in the program harmless from any and all claim and causes of action of any nature for any nature for any and all personal injury or illness, including death, which may occur to me and/or my child or which may be aggravated during or by any activity during the course of the program in which I have decide to allow myself and/or my child to engage. I further waive any and all claims or causes of action, which I and/or my child may now or hereafter have against Releases which may at any time arise as a result of any act or thing occurring in or arising out of my and/or my child's participation in the program. I further expressly understand and agree the foregoing indemnity, release and waiver is intended to be as broad and inclusive as permitted by the law of the State of North Carolina and that any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full force and effect.

2) **ASSUMPTION OF RISK:** I, individually and/or on behalf of any minor child, expressly and specifically assume any and all risk of injury, illness, death, or property damage resulting from my YMCA activities. You assume the risks: I, individually and on behalf of my minor child, understand that YMCA activities are strenuous and dangerous and should be engaged in only by persons in good health. I understand that I should consult a physician before enrolling myself and/or my child in the YMCA program. Once you sign, you are saying that you understand the risks involved and accept all of the risks.

3) **MEDICAL RELEASE:** I, individually and/or on behalf of any minor child, further hereby release YMCA from any claim whatsoever which may arise as a result of any first aid, treatment, or services or assistance provided to me in connection with any injury that arises from activities at YMCA. A) I take full responsibility for my and my child(s) welfare and safety on or at YMCA activities. B) I hereby give permission for emergency medical treatment to be administered as deemed appropriate.

4) **INSURANCE:** YOU ARE EXPECTED TO HAVE YOUR OWN HEALTH INSURANCE. You should understand that the YMCA does not carry insurance to cover injuries and losses that may befall you.

5) **PHOTOGRAPHIC RELEASE:** I consent to be photographed and to allow the YMCA and/or outside league sponsors to use any photos of myself and/or my minor child at its sole discretion.

6) The YMCA reserves the right to request a birth certificate for verification purposes.

HAVING READ, UNDERSTOOD, AND AGREED WITH THESE TERMS, I HAVE EXECUTED THIS RELEASE, TO BE EFFECTIVE IMMEDIATELY.

Applicant or Parent/Legal Guardian Signature _____ Date _____

I am willing to participate as a volunteer in support of this program as a (check one or more):

Coach ____ Assistant Coach ____ Referee/Umpire ____ Scorekeeper ____ Other ____

Session Code: Sep15 Program Code: 07sp