



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

GET YOUR GAME ON

YOUTH BASKETBALL

Boys & Girls 3rd-5th Grade Basketball SWITZERLAND COUNTY YMCA GYM

Get in the game during the Switzerland County YMCA's elementary basketball league. This fall we are offering a 6 week program for boys and girls in 3rd, 4th and 5th grade enrolled at a Switzerland County Elementary School. Each grade level will have a boys and a girls team led by volunteer coaches. Teams will have one week of practice before games begin on six consecutive Saturdays. Our basketball program is recreational, fun, and designed to instruct participants on the basic fundamentals and skills of the sport. Games will be held on Saturdays. Each participant will receive a t-shirt. This program is provided free to residents of Switzerland County thanks to the Switzerland County School Endowment.

2020 Boys & Girls 3rd-5th Grade Basketball Registration Form (PLEASE PRINT LEGIBLY)

Participant's Information

Name: _____ Age: ____ DOB: __/__/____ Gender: Male Female _____

Address: _____ City: _____ Zip: _____

School: _____

Does your child have any physical conditions that would limit his participation in this program? If yes, please explain:

Shirt Size: __YS (6-8) __YM (10-12) __YL (14-16)
__AS __AM __AL __AXL __AXXL

YMCA Member: __Yes __No

Grade: ____ 3rd grade ____ 4th grade ____ 5th grade





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Ages

Boys & Girls in 3rd-5th grade

Dates

Practices begin the week of October 12th

Games: Oct. 17, Oct. 24, Oct. 31, Nov. 7, Nov. 14, and Nov. 21

Coaches

All coaches must attend a coaches meeting at the YMCA led by YMCA staff and SCHS Basketball Coaches.
Date and time TBD.

Registration

Cost: \$0 (Thanks to the Switzerland County School Endowment)

Registration ends Friday, October 2

Online registration available at www.switzymca.org

Like us on Facebook for more updates and upcoming events

Go to switzymca.org for more info about this program and other upcoming events

Registration forms can be turned into the school or the Y.

Parent/Guardian Information

Name: _____ Phone: _____ E-mail: _____

Emergency Contact Information

Name: _____ Relation to Child: _____ Phone: _____

Volunteer Information: ☐ Head Coach ☐ Assistant Coach ☐ Referee

Name: _____ T-shirt size: _____

Phone: _____ E-mail: _____

Release: I hereby certify that my child is in normal health and capable of safe participation in this program. If my child has a condition, I will show written proof of my physician's authorization to participate in this program or my child is participating with my knowledge of possible risk. I agree to indemnify the Switzerland County YMCA, staff, volunteers, Board of Directors, and all instructors of this program from any and all injuries, which may occur during my child's participation and/or transportation to this program. In the event that the YMCA is unable to reach me or my emergency contact, I give permission to the YMCA to proceed with emergency treatment or transportation to and/or admission to the nearest hospital.

I give _____ I do not give _____ permission for my child's photo to be used in promotional literature.

Parent/Guardian Signature

Date