



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# PICK UP YOUR GAME

## YOUTH BASKETBALL

### Elementary Girls K-2nd Grade Basketball Clinic



#### Registration

Cost: Switzerland County Residents/  
Switzerland County Students—\$0  
(Thanks to the Switzerland County  
School Endowment)

Non-Residents—\$20

**Dates:** Monday Evenings; Feb. 24th, March 2nd,  
March 9th, and March 16th

**Time:** 6:00-7:00 pm

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#### Participant Information

K-2nd Grade Girls Basketball Clinic Registration Form: One participant per form, Please PRINT LEGIBLY! AND WAIVER MUST BE SIGNED IN ORDER TO PARTICIPATE on the reverse side. Online registration is available at [www.switzymca.org](http://www.switzymca.org).

Jeff-Craig Elementary School \_\_\_\_\_ Switzerland County Elementary School \_\_\_\_\_  
Grade (Please circle)      K                      1st                      2nd

NAME: \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

HOME PHONE # \_\_\_\_\_ CELL PHONE # \_\_\_\_\_

Does your child have any physical conditions that would limit her participation in this program? If yes,  
please explain. \_\_\_\_\_

T-SHIRT SIZE (please circle size)    YS    YM    YL    AS    AM    AL    AXL    AXXL

#### Parent/Guardian Information

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

# INFORMATION:

**Session Dates:** February 24th, March 2nd, March 9th, March 16th

**Monday Evenings at 6:00**

**Cost:** \$0 for Switzerland County Residents/Switzerland County Students. \$20 for out of county participants.

## HOW TO REGISTER

IN PERSON at: Switzerland County YMCA

MAIL completed entry form and fee to:

Switzerland County YMCA  
PO Box 113  
Vevay, IN 47043

ONLINE at: [www.switzymca.org](http://www.switzymca.org)

Have your Kindergarten, 1st, and 2nd grade girls pick up their game at our basketball clinic. This winter we are offering a 4 week program for girls in Kindergarten, 1st, and 2nd grade. This program is both instructional and fun. It is designed to instruct participants on the basic fundamentals and skills of basketball. This clinic is led by the Switzerland County High School Girls Basketball Coaching Staff and players.

**SWITZERLAND COUNTY YMCA**  
1114 West Main Street Vevay, IN 47043  
812 427 9622 [www.switzymca.org](http://www.switzymca.org)  
Contact: Olivia Hewitt

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### Emergency Contact Information #1

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relation to Child: \_\_\_\_\_

### Emergency Contact Information #2

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relation to Child: \_\_\_\_\_

### WAIVER: Important! Please read & sign this release

All participants must read and sign. I understand that this program carries with it the potential for physical injury and property loss. I hereby assume the risks of participating in this program and certify that I am physically fit, and have not been advised against participation by any qualified health professional. I agree that I hereby waive, release and forever discharge the Switzerland County YMCA, volunteers, Switzerland County Public Schools, and any and all claims, losses, or liabilities for death, personal injury, partial or permanent disability, property damage, medical or hospital bills, theft, or damage of any kind, including economic losses, which may in the future arise out of, or relate to, my participation in or my traveling to or from this program. This release of liability expressly extends to any negligence on the part of any of the parties release herein.

**PHOTO PERMISSION:** We, participating individual or legal guardian, do hereby grant permission for photos to be used in publicity or brochures to the Switzerland County YMCA.

Signature \_\_\_\_\_

Legal Guardian Signature \_\_\_\_\_  
(Required for participants under the age of 18 years)