



Itty-Bitty Sports 2019 Registration Form

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

Name:	Height:
Address:	Weight:
City:	Gender (Circle One): Male Female
State	Zip:
Birthdate:	Age:
Father (Guardian):	Mother (Guardian):
Phone 1:	Phone 2:
Work #:	Work #:
Email:	

PLEASE CIRCLE WHICH SESSION YOUR CHILD WISHES TO ATTEND
THERE ARE NO REFUNDS/CREDITS ON REGISTRATION FEES.

SESSION A-
Wednesday 3:30pm-4:30pm
Session A: Begins March 27TH

or

SESSION B-
Friday 10:00am-11:00am
Session B: Begins March 29TH



Sessions are 8 Weeks long. The kids will learn & play T-Ball the first 4 weeks. Then they will learn & play Soccer the last 4 weeks.



YMCA Members: \$45.00
Community Members: \$65.00

I AUTHORIZE THE FOLLOWING INDIVIDUALS TO COLLECT MY CHILD FROM THE FACILITY IN CASE OF EMERGENCY OR IF I CANNOT BE REACHED:

Name:	Phone:
Name:	Phone:
Office Use (Please Initial): Waiver Signed____ Form Complete____ Photo Release____	



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Member Name _____

**Prescott YMCA of Yavapai County
RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT**

In consideration for being permitted to utilize the facilities, services, and programs of the Prescott Young Mens Christian Association of Yavapai County (the"YMCA") for any purpose, including but not limited to observation or use of facilities or equipment, or participation in any program affiliated with the YMCA, without respect to location, the undersigned, for himself or herself and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such premises and all facilities and equipment thereon and such affiliated programs have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use, or participation.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE, INCLUDING BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY PROGRAM AFFILIATED WITH THE YMCA, WITHOUT RESPECT TO LOCATION, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the YMCA, its directors, officers, employees, and agents (hereinafter referred to as "releasees") from all liability to the undersigned, his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefor on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releasees or otherwise while the undersigned is in, upon, or about the premises or any facilities or equipment therein, or participating in any program affiliated with the YMCA, without respect to location.
2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any loss, liability, damage, or cost they may incur due to the presence of the undersigned in, upon, or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA whether caused by the negligence of the releasees or otherwise.
3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE due to negligence of releasees or otherwise while in, about, or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA.

THE UNDERSIGNED further expressly agrees that the forgoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of Arizona and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements, or inducement apart from the foregoing written agreement have been made.

I HAVE READ THIS RELEASE:

I HAVE READ THIS RELEASE:

Participant's signature Date

Parent's or guardian's signature Date
(if participant is legally a minor)

PHOTO / VIDEO RELEASE

While participating at the YMCA, the Prescott YMCA has permission to photograph or video me and or my family for publicity purposes.

Parent / Legal Guardian Signature

Date

RESPONSIBLE BEHAVIOR POLICY

I have received a copy of the James Family Prescott YMCA Responsible Behavior Policy.

Parent / Legal Guardian Signature

Date



**James Family Prescott YMCA
Youth Programs
Parent Statement of Understanding**

FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Child's Name _____ Program Attending _____ DOB _____

The following information is important for the safety and protection of your child.

I understand that YMCA staff/volunteers will respect children's rights not to be touched or looked at in ways that make them feel uncomfortable and will not violate personal boundaries.

I understand that YMCA staff/volunteers are not allowed to babysit or transport youth at any time outside the YMCA.

I understand that YMCA staff/volunteers may not date program participants under the age of 18.

I understand that YMCA staff/volunteers may not have social media contact or text/call youth program participants.

I understand that YMCA staff/volunteers will not share personal information about any YMCA members/program participants.

I understand that youth should not receive excessive gifts (e.g., TV, video games, jewelry) from YMCA staff/volunteers.

I understand that the YMCA is an alcohol, tobacco products, and weapons free campus.

I understand that I am not to leave my child (under 10) at the YMCA unsupervised.

I understand that my child in YMCA licensed child care will not be allowed to leave the program with an unauthorized person. Any person authorized to pick up my child, including older siblings or other relatives, must be listed with the YMCA and must be of the age required by state licensing.

I understand that should a person arrive to pick up my child who appears to be under the influence of drugs or alcohol, for the child's safety, staff/volunteers may contact the authorities if necessary.

I understand that the YMCA staff/volunteers are mandated reporters and will report any suspicion of sexual abuse, physical abuse, neglect or mental/verbal abuse to the appropriate authorities.

I understand that I can help ensure my child's safety by taking an active interest in his or her YMCA experience. I too will monitor staff/volunteer interactions with my child and ask my child specific questions about program activities and will report any suspicions/violations to YMCA staff.

Parent/Legal Guardian Name (print)

Parent/Legal Guardian Signature
(legal signature as it appears on driver's license/ID)

Date

Revised 04/19/18