



Lynch-van Otterloo YMCA Children's Sports Leagues



Registration Form for all leagues

PLEASE CHECK APPROPRIATE LEAGUE

Preschool League (ages 4-5) _____

Kindergarten Leagues (grades K) _____

Junior League (grades 1-2) _____

Other: _____

**Schedules will be emailed out prior to the start of leagues.
Please check the program guide for complete league description.*

Name of Player _____ Sex _____ Birth date ___/___/___ Age _____

Address _____ City _____ Zip _____

Phone _____ Email _____

Mother(s) name(s) _____ Phone _____

Father(s) name(s) _____ Phone _____

In case of emergency contact _____ Phone _____ Relationship _____

Team/special requests _____

AGREEMENT

1. I hereby certify that my child is in normal health and capable of safe participation in the youth sports program. I assume all risk(s) and hazards incidental to the conduct of this program and for the transportation to and from the program. I hereby authorize the YMCA to obtain medical treatment for my child in the event that parent(s) and the emergency contact cannot be reached.
2. I support the YMCA Mission, which is based on participation, physical fitness, skill development, teamwork, fair play and family involvement.
3. I am willing to participate as a volunteer in support of this program as a:
 Coach
 Assistant Coach

Signature or parent of guardian

Date

For questions, please contact Karl Mayer at 781-990-7013 or mayerk@northshoreymca.org

FOR OFFICE USE

Date _____ Amount paid _____ Check # _____ Cash _____ Receipt # _____

Scholarship amount _____ Team assignment _____