



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

YMCA Basketball League Registration

Team Name: _____

****THIS FORM MUST BE COMPLETED AND TURNED IN BY JANUARY 3RD AT THE ORGANIZATIONAL MEETING.**

Division: ____ A ____ B ____ Church

By signing below, In consideration of being permitted to participate in the above sport, I, in full recognition and appreciation of the dangers and risks inherent in such activities, do hereby waive, release, and forever discharge The YMCA, its staff, as well as collaborative partners from and against any and all claims, demands, action or causes of action for costs, expenses or damages to personal property or personal injury, or death, which may result from my participation in these activities.

By signing below, I am also acknowledging that I have read the rules for the basketball league and agree to follow them.

Name: _____ DOB: _____ Email Address: _____

Address: _____ Phone #: _____

Signature: _____ Date: _____ Shirt Size: _____

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



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