



# YBASKETBALL™

We build strong kids, strong families, strong communities.



## Salem Family YMCA Fall Basketball Registration 2009

We build great kids first and great athletes second by teaching sportsmanship, teamwork, caring, respect, responsibility and honesty. In Y-Basketball, every athlete has equal playing time. Kinder-3/4 division will not keep score. Your coach will contact you by October 19. Practices may be held offsite. You will receive more information after registration via e-mail.

Cost: \$30.00 YMCA members  
\$40.00 Non-members  
**\*\$10.00 late charge will apply if registering after October 16th.**

**Registration begins today through October 16, 2009!**

Age Divisions for co-ed teams by grades:  
Kindergarten  
1st & 2nd  
3rd & 4th  
5th & 6th

### Participant Information

Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_  
 Birthdate: \_\_\_\_\_ Grade: \_\_\_\_\_  
 School: \_\_\_\_\_ Gender: \_\_\_\_\_  
 Home Address: \_\_\_\_\_  
 \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 T-shirt size:            Youth Small      Youth Medium      Youth Large  
                                  Adult Small      Adult Medium      Adult Large

### Parents Information

Parent Name: \_\_\_\_\_ Parent 2 Name: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_ Cell Phone 2: \_\_\_\_\_  
 E-mail (your e-mail address will not be placed on spam mailing lists)  
 \_\_\_\_\_  
**Special Request (Example: Specific coach or friends to be placed together):**  
 \_\_\_\_\_



**Circle if you would like to be a Coach:**

**Head Coach**

**Assistant Coach**

I hereby certify that my child is in normal health and capable of participating safely in YMCA Sports. I understand that my child will be participating in various sports-related activities and the YMCA, its staff and volunteers, or any sponsors will not be held liable for any physical harm incurred to my child from this program. I also understand that I will not hold the YMCA, Youth staff, or any other parent/guardian responsible for injury in which my child may be involved before/after or a result of traveling to and from YMCA Sports.

Parent/Guardian Signature: \_\_\_\_\_

Register at the Salem Family YMCA or send form with check to:  
 Salem Family YMCA  
 Youth Sports  
 685 Court St NE  
 Salem, OR 97301

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