



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# Winter Sports 2019

## WALZEM FAMILY YMCA

League age cut-off:

Sept. 1, 2018

### Basketball Clinic

☐ Pee Wee & Me (2 - 3yrs)

### Basketball League (co-ed)

- ☐ 5U (4 - 5yrs)
- ☐ 7U (6 - 7yrs)
- ☐ 9U (8 - 9yrs)
- ☐ 11U (10 - 11yrs)
- ☐ 13U (12 - 13yrs)

### Important Dates

Jan. 4 - Coaches Meeting

Jan. 5 - Parents Meeting

10a - 11a: Ages 2 - 7

11a - 12p: Ages 8 - 13

Jan. 7 - Practice begins

### YOUTH SPORTS PROGRAM FEES

Early Bird	General Registration	Last Call	Amount Paid
Oct. 8 - 28	Oct. 29 - Nov. 11	Nov. 19 - Dec. 2	
<b>PeeWee &amp; Me (2-3yrs) - Facility Member Rates</b>			
\$40	\$50	\$60	\$
<b>PeeWee &amp; Me (2-3yrs) - Non-Member Rates</b>			
\$50	\$60	\$70	\$
<b>Basketball (5 - 12yrs) - Facility Member Rates</b>			
\$50	\$60	\$80	\$
<b>Basketball (5-12yrs) - Non-Member Rates</b>			
\$60	\$70	\$90	\$

Please review our Sports Weather Policy located on parent information sheets & at [www.ymcasatx.org/weatherpolicy](http://www.ymcasatx.org/weatherpolicy)

Check # \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

## Program Information

**Practices** are held at the YMCA or SCUC ISD Gyms - Practices times and locations are based on availability of the facilities and coaches schedules. Therefore, the YMCA cannot guarantee specific practice days, times, and location request.

**Coaches meetings** Team Rosters will be distributed. Your coach will contact you with practice site and time information. Please allow all coaches at least one week from the Coaches meetings to contact their team.

**YMCA Jersey** Provided. Only YMCA Sanctioned Uniforms allowed. Due to the size of the program the YMCA cannot guarantee exact sizing of uniforms. General orders are placed with YMCA's vendors using national size recommendations in each age division.

**Coach requests** are not guaranteed and can only be considered if noted on registrations form.

**Player requests** are not guaranteed and can only be considered if players register at same time.

### Registration Locations

WALZEM FAMILY YMCA - 5538 Walzem Rd • 210-656-5777

**ONLINE REGISTRATION AVAILABLE** - Online you're first in line at [www.ymcasatx.org](http://www.ymcasatx.org)

**Financial Assistance is available through our Open Doors Scholarship Program.**

**YMCA Mission:** To put Judeo-Christian principles into practice through programs that build healthy spirit, mind and body for all.



# REGISTRATION

My child is a :    Returning Player/New Player    Player DOB:    /    /    Age on 9/1/18:

Player Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Gender: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Ph: \_\_\_\_\_

Parent/Guardian 1: \_\_\_\_\_ DOB: \_\_\_\_\_ Cell Ph: \_\_\_\_\_

Email: \_\_\_\_\_ Employer: \_\_\_\_\_ Work Ph: \_\_\_\_\_

☐ I would like to volunteer as a Coach/Assistant Coach.

Parent/Guardian 2: \_\_\_\_\_ DOB: \_\_\_\_\_ Cell Ph: \_\_\_\_\_

Email: \_\_\_\_\_ Employer: \_\_\_\_\_ Work Ph: \_\_\_\_\_

☐ I would like to volunteer as a Coach/Assistant Coach.

## How did you hear about us?

☐ Friend ☐ E-mail ☐ Direct Mailer ☐ Flyer ☐ Social Media ☐ Other: \_\_\_\_\_

What school does the player attend?: \_\_\_\_\_

Special Requests (note: requests are NOT guaranteed)

Coach Request \_\_\_\_\_ Player Request \_\_\_\_\_

### Practice days are subject to availability.

Please circle three(3) days you are available for practice (note: if you have a coach/player request do NOT circle days available.)

Monday    Tuesday    Wednesday    Thursday    Friday

## Demographic Information

We request the following demographic information for general reporting use only. It is kept confidential and is reported in summary form only. It is not related to any fees you may be charged. Our funding sources require us to report the information on ALL persons we serve in the Greater San Antonio area. Please answer the following:

What ethnicity is your child?

Hispanic/Spanish    White/Caucasian    African American    Asian American/Pacific Islander    American Indian, Eskimo    Other

Household Income over past 12 months:

<\$5,000    \$5,000-9,999    \$10,000-14,999    \$15,000-24,999    \$25,000-34,999    \$35,000-49,999    Over \$50,000

Child's Household:

Two Parent    Single Parent (Male or Female)    Other \_\_\_\_    # of Adults (18+ yrs) \_\_\_\_    # of Children (<18 yrs) \_\_\_\_

## PARENT SIGNATURE

I will be responsible for my child's medical costs due to accident or illness. I will hold the YMCA of Greater San Antonio and its directors, officers, employees, volunteers and other agents harmless for incidents which may arise from participation in the YMCA programs and activities, realizing that there are risks in these activities. I give permission for photographs to be made of my child(ren) to be used solely for publicity and training purposes by the YMCA of Greater San Antonio. The YMCA has my permission to evaluate the impact of their programs on my children. I understand that surveys may be conducted on a routine basis and that all information collected on individual children will be confidential. Group averages will be shared with staff to improve programs, with donors to maintain funding and with parents/volunteers to provide information on how the YMCA is building strong kids, strong families and strong communities. **I understand all refund/credit requests must be made in writing and will only be considered before the first game. There will be a \$20 service fee on all refunds/credits. Any credits not utilized within 1 year of issuance will be forfeited.**

Parent's Signature

Date