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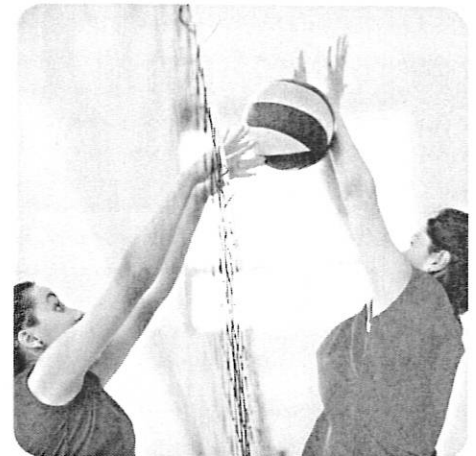
Spring Volleyball

ALEX W. SPEARS III FAMILY YMCA

Age Groups:

4<sup>th</sup>-5<sup>th</sup> Grade, 6<sup>th</sup>-8<sup>th</sup> Grade, 9<sup>th</sup>-12<sup>th</sup>

FOR YOUTH DEVELOPMENT<sup>®</sup>  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY



3<sup>rd</sup> Grade Mozgai Volleyball Academy will be held on Saturdays from 9:00 – 10:30 am April 6<sup>th</sup> through May 18<sup>th</sup>. Six sessions to introduce basic volleyball skills. Limited to the first 30 participants.

YMCA Sports Philosophy: Participants have FUN in a safe learning environment. The YMCA believes in the God-given potential of every child; encourages teamwork and a sense of belonging.

Early Bird Registration (From January 7<sup>th</sup> thru February 8<sup>th</sup>)

\$60.00 YMCA Members or \$90.00 Potential Members

Standard Registration (From February 9<sup>th</sup> thru February 22<sup>nd</sup>)

\$80.00 YMCA Members or \$110.00 Potential Members

All registrations received after February 22<sup>nd</sup> will have a \$5.00 late fee.

Deadlines:

Financial Assistance Deadline – February 1<sup>st</sup>, 2019

Early Bird Registration Deadline – February 8<sup>th</sup>, 2019

Final Deadline for Registration – February 22<sup>nd</sup>, 2019

Important Dates:

Practices Start – Week of March 18<sup>th</sup>, 2019

Games Start – Week of April 1<sup>st</sup>, 2019

Register Online at [spearsymca.org](http://spearsymca.org)

Contact Cathy Sescourka, Volleyball Coordinator at 336.387.9622 or [Cathy.Sescourka@ymcagreensboro.org](mailto:Cathy.Sescourka@ymcagreensboro.org) for more information.

The mission of the YMCA of Greensboro is to put Judeo-Christian principles into practice through programs that build a healthy spirit, mind, and body for all.

# Spears YMCA Sports Registration Form

Sport: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_ Age: \_\_\_ Age Group: \_\_\_ Gender: \_\_\_ School: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_ Zip: \_\_\_\_\_

T-Shirt Size YS YM YL AS AM AL AXL Number of Seasons Play in this Sport: \_\_\_\_\_

**PARENT/GUARDIAN INFORMATION**

**Guardian #1 (person who will be contacted in case of practice/game changes or cancelations)**

Name: \_\_\_\_\_ Relationship \_\_\_\_\_ (C) \_\_\_\_\_

Phone Carrier: \_\_\_\_\_

Email:

Guardian #2 Name \_\_\_\_\_ Relationship \_\_\_\_\_ (C) \_\_\_\_\_

Phone Carrier: \_\_\_\_\_

Email:

**AS A PARENT I WOULD LIKE TO (Circle one):**

Coach (Shirt Size: \_\_\_\_\_) Asst. Coach Team Parent Sponsor a Team (\$150 one team; \$200 two teams)

**REQUESTS: (Not all requests can be filled. Certain age groups cannot honor requests.)**

Coach Request: \_\_\_\_\_ Night You CANNOT Practice: M  T  W  Th  F

Sibling/Friend Request (one choice only): \_\_\_\_\_ 1st Priority: Coach Sibling Night

**RELEASE AND WAIVER OF LEGAL LIABILITY:**

THIS IS YOUR RELEASE AND WAIVER OF LIABILITY (the "Release"). You individually and/or on behalf of any minor child, release the YMCA of Greensboro, Inc., its officers, directors, board members, employees, volunteers, agents, independent contractors, other participants and/or others acting on its behalf (collectively, "YMCA"). You agree that this Release is effective immediately.

This is important to you and/or any minor children, so do not sign until you have had your questions answered. You provide this Release freely, and without duress under the following terms:

- 1) GENERAL RELEASE: I hereby agree for myself and/or my child and our respective heirs, assigns and legal representatives, to indemnify, defend and hold YMCA and its officers, directors, board members, employees, volunteers, agents, independent contractors and other participants ("Releases") in the program harmless from any and all claim and causes of action of any nature for any and all personal injury or illness, including death, which may occur to me and/or my child or which may be aggravated during or by any activity during the course of the program in which I have decided to allow myself and/or my child to engage. I further waive any and all claims or causes of action, which I and/or my child may now or hereafter have against Releases which may at any time arise as a result of any act or thing occurring in or arising out of my and/or my child's participation in the program. I further expressly understand and agree the foregoing indemnity, release and waiver is intended to be as broad and inclusive as permitted by the law of the State of North Carolina and that any portion thereof is held invalid, it is agreed that the balance shall, not with standing, continue in full force and effect.
- 2) ASSUMPTION OF RISK: I, individually and/or on behalf of any minor child, expressly and specifically assume any and all risk of injury, illness, death, or property damage resulting from my YMCA activities. You assume the risks: I, individually and on behalf of my minor child, understand that YMCA activities are strenuous and dangerous and should be engaged in only by persons in good health. I understand that I should consult a physician before enrolling myself and/or my child in the YMCA program. Once you sign, you are saying that you understand the risks involved and accept all of the risks.
- 3) MEDICAL RELEASE: I, individually and/or on behalf of any minor child, further hereby release YMCA from any claim whatsoever which may arise as a result of any first aid, treatment, or services or assistance provided to me in connection with any injury that arises from activities at YMCA. A) I take full responsibility for my and my child(s) welfare and safety on or at YMCA activities. B) I hereby give permission for emergency medical treatment to be administered as deemed appropriate.
- 4) INSURANCE: YOU ARE EXPECTED TO HAVE YOUR OWN HEALTH INSURANCE. You should understand that the YMCA does not carry insurance to cover injuries and losses that may befall you.
- 5) PHOTOGRAPHIC RELEASE: I consent to be photographed and to allow YMCA's use of any photos of myself and/or my minor child at its sole discretion.
- (6) Parents Code of Ethics: I agree to act in an appropriate manner and be supportive of all players/coaches/officials.

HAVING READ, UNDERSTOOD, AND AGREE WITH THESE TERMS, I HAVE EXECUTED THIS RELEASE, TO BE EFFECTIVE IMMEDIATELY.

Parent/Guardian

Signature: \_\_\_\_\_ Date \_\_\_\_\_

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Email contact: You will receive emails from our player management system PlayerSpace. Please be sure to check your spam folder for potential emails as we reach the start of the season. Emails will come from this address: noreply@playerspace.com