



2009 – 2010 PRE-REGISTRATION FORM

GIRLS YMCA SPORTS

Y Girls Sports	Grades able to Play	Season Dates	Registration Deadline
Girls Basketball	1st - 6th	Oct 3rd - Dec 12th	<u>September 21st</u>
Co-Ed Floor Hockey	1st - 4th	Oct 6th - Nov 17th	<u>September 21st</u>
Volleyball	3rd - 6th	Jan 19th - March 6th	December 28th
Slow Pitch Softball	1st - 8th	April 29th - May 29th	April 20th

Special Price for

Girls Sports Pre-Registration Week:

September 1st – 9th

Get 15% OFF **All Girls Sports Fees**

All Y sports can still be registered for prior to deadline.

Girls Interstate Tournament
Is December 4th & 5th 2009

	Membership Rate	1st Sport Fee	2nd Sport Fee	3rd Sport Fee
Youth: In Town	\$ 86.00	\$ 30.00	\$ 30.00	\$ 15.00
Youth: Out of Town	\$ 40.00	\$ 30.00	\$ 30.00	\$ 15.00
Family Membership		\$ 25.00	\$ 25.00	\$ 12.00

*The YMCA is a membership organization. Membership is required through the Y sports season.

*Youth In Town: Resides at an Aberdeen address OR attends an Aberdeen school

*YMCA Contact For All Sports: Dan Grewe 225-4910

Future information such as game schedules or changes will be available online at www.aberdeenymca.org

2009-2010 YMCA Girls Sports Pre-Registration Form

All information below is REQUIRED:

Last Name _____ First Name _____

Address _____ City _____

Home Phone _____ Birth Date _____

Grade Attending THIS Fall '09: _____ School: _____

Father's Name: _____ Work Phone: _____ Cell: _____

Mother's Name: _____ Work Phone: _____ Cell: _____

Please circle all sports in which you are registering for the 2009 – 10 seasons:

Girls Basketball Co –Ed Floor Hockey Girls Volleyball Slow Pitch Softball

Please indicate if you are willing to volunteer for any of the following:

<u>Girls Basketball:</u> Coach	Asst. Coach	<u>Girls Volleyball:</u> Coach	Asst. Coach
<u>Co –Ed Floor Hockey</u> Coach		<u>Slow Pitch Softball</u> Coach	Asst. Coach

Name: _____ Work Phone: _____ Cell: _____

Primary Email Address: _____

YMCA WAIVER of Liability

*I give my permission for _____ to participate in the Aberdeen Family YMCA Sports Leagues. I understand that accidents can and do happen and that the "Y" has no responsibility, assumes none, and carries no accident insurance for my child's medical expenses and well being. I waive all rights against the Aberdeen Family YMCA.

* I give the Aberdeen Family YMCA permission to use my child's picture in YMCA publications. YES NO

Parents signature _____ Date _____

****Office Use Only: Staff Initials _____ Date _____ Receipt # _____ Amt Paid _____