



FOR YOUTH DEVELOPMENT®  
 FOR HEALTHY LIVING  
 FOR SOCIAL RESPONSIBILITY



## YMCA OF NATRONA COUNTY YOUTH FALL BASKETBALL

<b>Program Info</b>		<b>Division I (3-4 years)</b>
<b>Registration Deadline</b> October 14 <b>Practices Begin</b> week of October 29 <b>Games</b> begin November 10 <b>Fees</b> Through October 14: \$40 Member / \$60 Nonmember After October 14: \$15 late fee added (late registration limited to available spots)		<b>Begins:</b> Wednesday, November 7 <b>Ends:</b> Saturday, December 15 <b>Practice:</b> Wednesday evenings (Times TBD by number of teams) <b>Games:</b> Saturdays <b>Cost:</b> \$35 Member / \$55 Nonmember
<b>Division II (5 years/K)</b>	<b>Division III (1<sup>st</sup>/2<sup>nd</sup> Grade)</b>	<b>Division IV (3<sup>rd</sup>/4<sup>th</sup> Grade)</b>
<b>Begins:</b> Thursday, November 1 <b>Ends:</b> Saturday, December 15 <b>Practice:</b> Thursday evenings (Times TBD by number of teams) <b>Games:</b> Saturdays <b>Cost:</b> \$40 Member / \$60 Nonmember	<b>Begins:</b> Monday, October 29 <b>Ends:</b> Saturday, December 15 <b>Practice:</b> Monday evenings (Times TBD by number of teams) <b>Games:</b> Saturdays <b>Cost:</b> \$40 Member / \$60 Nonmember	<b>Begins:</b> Friday, November 2 <b>Ends:</b> Saturday, December 15 <b>Practice:</b> Friday evenings (Times TBD by number of teams) <b>Games:</b> Saturdays <b>Cost:</b> \$40 Member / \$60 Nonmember
<b>Sports Contact:</b> Risa Phillips, Program Director – Membership & Sports, 307-234-9187 or rphillips@casperfamilyymca.org		

**YES I WANT TO COACH!** Volunteer Form (Volunteer Coaches are always needed!)

Coaches Name \_\_\_\_\_ T-Shirt Size (Unisex)   S     M     L     XL     XXL    
 Phone \_\_\_\_\_ E-mail \_\_\_\_\_ DOB \_\_\_\_\_

**YMCA Youth Basketball Registration**

Participant Name \_\_\_\_\_ DOB \_\_\_\_\_  
 School Attending \_\_\_\_\_ Grade \_\_\_\_\_  
 Shirt Size   YXS (2/4)     YS (6/8)     YM (10/12)     YL (14/16)     YXL (18/20)     AS    
 Parent/Guardian Name \_\_\_\_\_ DOB \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ E-Mail \_\_\_\_\_  
 Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_  
 Coach Request \_\_\_\_\_ Player Request (limit of 1) \_\_\_\_\_

The undersigned parent/guardian does hereby authorize the NERD YMCA of Natrona County to seek and provide any medical emergency care necessary for the medical wellbeing of minor listed above. The NERD YMCA of Natrona County will not be held liable for any injury while participating in any YMCA activity. We reserve the right to use any photography or media during events for future promotions. A refund will not be issued for any programs. In the event that you need to cancel, a credit will be placed on your account for future use.

\_\_\_\_\_  
 Parent/Guardian Signature \_\_\_\_\_  
Date