

Date \_\_\_\_\_  
 Facility Member \_\_\_\_\_  
 Program Member \_\_\_\_\_  
 Amount Paid \_\_\_\_\_  
 Receipt # \_\_\_\_\_  
 Copy of B.C. \_\_\_\_\_

# CHATTANOOGA YMCA YOUTH SPORTS REGISTRATION FORM

1. Please mark one: I am registering for: Preschool (age 3/4) \_\_\_\_\_ Youth (age 5-16) \_\_\_\_\_ program.  
 Please mark one: Program desired: Football \_\_\_\_\_ Basketball \_\_\_\_\_ Soccer \_\_\_\_\_ Other \_\_\_\_\_  
 Please mark one: Season desired: Spring \_\_\_\_\_ Summer \_\_\_\_\_ Fall \_\_\_\_\_ Winter \_\_\_\_\_
2. Complete personal information in box below:

Child's Name: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ School Attending: \_\_\_\_\_ Grade: \_\_\_\_\_  
 Parent Completing Form: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Father's Name: \_\_\_\_\_ Employer: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Mother's Name: \_\_\_\_\_ Employer: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Insurance Company: \_\_\_\_\_ Policy No: \_\_\_\_\_  
 Parent E-mail Address \_\_\_\_\_

3. Please complete box to right:  
 How many years has your child played organized sports? \_\_\_\_\_  
**Parents: For Balance of Teams: AT PLAY, your child is best described as:**  
**1 being the least aggressive and 5 being the most aggressive (mark one)**  
 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_ 5 \_\_\_\_\_

4. If registering for football or basketball program, please complete the box to the right:

**Football Program**  
 Please complete. YMCA staff will confirm exact weight.  
 \_\_\_\_\_ pounds

**Basketball Program**  
 Please complete. YMCA staff will confirm exact height.  
 \_\_\_\_\_ feet \_\_\_\_\_ inches

5. Please list other previous sports experience below:

The YMCA considers all registrations without regard to race, color, religion, sex, national origin, or the presence of medical condition or handicap. However, the YMCA does reserve the right to refuse admission to any child who may require a level of attention beyond that which YMCA programs are designed to accommodate or who may require specialized training that may prevent YMCA staff from adequately meeting the needs of the child. I agree to abide by the rules and regulations as set forth by the YMCA staff. I will fully accept the decision of the YMCA staff regarding the placement of my child on a team. I will also conduct myself with a positive Christian attitude toward coaches, opposing team players, officials, and YMCA staff members during the course of the season. I understand that the YMCA does not provide insurance coverage for the above listed program participant and that I am responsible for my child's own personal coverage. By typing my name below, I am indicating that: this registration form is correct to the best of my knowledge and the child herein described has permission to engage in all prescribed activities except those noted by me. I understand that YMCA activities have inherent risks and I hereby assume all risks and hazards incident to my participation in all YMCA activities. I further waive, release, absolve, indemnify and agree to hold harmless the YMCA, the organizers, volunteers, supervisors, officers, directors, participants, coaches, referees, as well as, persons or parents transporting participants to and from activities from any claims or injury sustained during my participation in YMCA activities.

**PARENT/GUARDIAN SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

Volunteers Needed (please mark all that apply): \_\_\_ Coach \_\_\_ Assist Coach \_\_\_ Father help \_\_\_ Mother help  
 Uniform Size Estimate: \_\_\_ YXS \_\_\_ YS \_\_\_ YM \_\_\_ YL \_\_\_ AS \_\_\_ AM \_\_\_ AL Other size \_\_\_\_\_