

**WAIVER**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone#: \_\_\_\_\_

Emergency#: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

I/We hereby consent to and give permission for the above named child to participate in the Mt. Sterling YMCA Youth Basketball Program. By signing this also gives permission for photographs to be taken appearing in the local newspaper.

I/We waive any demand for insurance, understand that this participation might result in injury, and assume all risk and hazards incidental to such participation including transportation to and from the activities; and I/We do hereby waive, release, absolve, indemnity and agree to hold harmless the Mt. Sterling YMCA/Community Center, the organizers, sponsors, supervisors, participants, and persons transporting my/our son or daughter to and from activities, for any claim arising out of an injury to my/our son and daughter, and incident to said transportation or participation.

I do ( ) do not ( ) consent to emergency medical care being provided for my child.

I do ( ) do not ( ) consent to newspaper photographs of my child.

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

**The YMCA Provides financial assistance to those who qualify in order to participate in programs and membership services. Mt. Sterling Community Center YMCA PO Box 247, Rt. 99 South, Mt. Sterling Illinois 62353. 217 773-2230 [www.mtsterlingymca.net](http://www.mtsterlingymca.net)**

**The mission of the Mt. Sterling Community Center YMCA is to aid in the development of Christian Values and to support the physical, mental and spiritual well-being of individuals and families to improve the quality of their lives**



**FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY**

**DRIBBLE!  
PASS!  
SHOOT!  
3RD/4TH GRADE  
MT. STERLING  
YOUTH BASKETBALL**



The 7 week program begins  
January 28th in MS YMCA.

Game times will start at  
11:00am

- Mandatory skills clinic for all participants and Volunteer Coaches for 3/4 Grade will be on January 13th, 12-12:45pm
- Coach's meeting will take place immediately following skills clinic

Return this form with payment  
to the YMCA or mail to:

Mt. Sterling Community  
Center YMCA

P.O. Box 247

Mt. Sterling Il. 62353

Registration period is  
December 11th—January 12th

Registrations received after  
January 12th will have a \$10  
late fee added on.

## Sign up — Mt. Sterling

Name: \_\_\_\_\_

School: \_\_\_\_\_

Grade: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Guardian's name \_\_\_\_\_

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

\*Valid phone required for all league communication\*

Email Address: \_\_\_\_\_

\*Valid email required for all league communication\*

Shirt Size:

YXS YS YM YL YXL

AS AM AL AXL

Players Fee:

Mt. Sterling Y members \$24.00

Non members \$36.00

Checks should be made payable to

Mt. Sterling Community Center YMCA



## VOLUNTEERS ARE NEEDED!

The Mt. Sterling Community Center YMCA is in need of volunteer support. If you have a love for children, patience, and a little extra time on your hands, WE WANT YOU!!!!

Volunteers are critical to the success of this program. Regardless of basketball experience your help is needed

Please fill out the Form Below.

Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Would you be interested in being a head coach? YES NO

Coach Shirt Size

AS AM AL AXL AXXL AXXXL