



YMCA of Greenville Eastside Family Branch

For Office Use Only
 If coaching have they completed
 ___ Back ground check and
 ___ Volunteer application
 Is email address complete and correct ___
 Is all information filled out ___
 Staff Initials of confirmation _____

Fees and Placement

Members—\$54.00

Non—Members—\$84.00

There is a \$10.00 late fee if you register after end of registration date

Sport

- ___ Spring Soccer
- ___ Summer Baseball/Softball/T-ball
- ___ Fall Soccer
- ___ Flag Football
- ___ Cheerleading
- ___ Winter Basketball
- ___ Lacrosse

Age Group

- ___ 4-5 (co-ed)
- ___ 6-7 (co-ed)
- ___ 8-9 boys
- ___ 8-9 girls
- ___ U12 boys
- ___ U12 girls
- ___ U14 boys
- ___ U14 girls

Shirt Size

- ___ Youth Small (6-8)
- ___ Youth Medium (10-12)
- ___ Youth Large (14-16)
- ___ Adult Small
- ___ Adult Medium
- ___ Adult Large
- ___ Adult X-large

PLEASE PRINT

Child's Name: _____ Birth Date: _____ Age: _____ Gender: (circle) M or F

School: _____ ****Email Address:** _____

******(Required—Email address is used to communicate practice and game schedules only)

Address: _____ City: _____ Zip: _____

Home Phone: _____

Father/Guardian: _____ Cell Phone: _____ Work Phone: _____

Mother/guardian: _____ Cell Phone: _____ Work Phone: _____

Do you have siblings playing for Eastside YMCA? If yes, name _____ Age _____ Male ___ Female ___

RELEASE OF LIABILITY

In the event of an accident, I am aware that the YMCA of Greenville does not provide accidental insurance, and I will not hold the YMCA of Greenville responsible for any injury.

Signature of Parent/Guardian _____ Date _____

PHOTO RELEASE

I understand that my child may be photographed, videotaped, and/or interviewed for the purpose of YMCA promotional use.

Signature of Parent/Guardian _____ Date _____

YOUTH SPORTS SPONSORSHIP

Sponsorships' are a great way to advertise your business and help the community. Please contact Cameron McDowell at the Eastside Family YMCA if you or someone you know is interested.

Scheduling Information

Please list best practice days and times (ex 1st choice - Tues @ 5:30 pm, 2nd choice - Tues @ 6:30 pm, etc):

4-5 year olds will practice on Tues@6 PM or Thurs@6 PM

1st choice _____ 2nd choice _____

6-7 year olds will practice on Monday @ 5:30 or 6:30 PM, Tuesday @ 5:30 or 6:30 PM, or Thursday @ 5:30 or 6:30 PM

1st choice _____ 2nd choice _____ 3rd choice _____

8-14 year olds will practice on Monday @ 5:30 or 6:30 PM, Tuesday @ 5:30 or 6:30 PM, or Thursday @ 5:30 or 6:30 PM

1st choice _____ 2nd choice _____ 3rd choice _____

Is there a day of the week or time you cannot practice? Please specify - _____

The Eastside Family YMCA Youth Sports program needs volunteers. Please sign up to coach, assistant coach or team parent.

Coach: Name - _____ Phone Number - _____

Assistant Coach: Name - _____ Phone Number - _____

Team Parent: Name - _____ Phone Number - _____

Day and Time you want to practice (ex: Tues @5:30 pm, Wed @5:30 pm, etc): _____

Best email to contact you at: _____

****This will be the primary contact with the Sports Director**

Have you filled out the following if coaching or assistant coaching ONLY:

___ Back ground check ___ Volunteer application