YMCA of Niagara

Youth Sports Leagues Registration Form

Basketball • Volleyball

ymcaofniagara.org
leagues@ymcaofniagara.ca
905-871-9622

League Information

The YMCA Youth Sports Leagues are co-ed programs, where children and youth can develop and learn new skills. Practices take place at local Fort Erie and Ridgeway schools Monday to Thursday nights, with games running on Saturdays at the Fort Erie EJ Freeland YMCA.

Once registration closes, the league team leader and coaches will contact parents to communicate when practices and games will begin. The game schedules will be distributed during the first week of practices.

Regular seasons run for 9 weeks, followed by a season ending tournament

As part of the registration fee each player will receive a Youth Sports League t-shirt.

Our Program promises to:

- Develop fundamental skills, sportsmanship and a love of the game
- Allow each player fair playing time; there are no benchwarmers in our league!
- A focus on co-operation, team work and fair play
- Encourage positive relationships with peers
- Be lots of fun for your son or daughter

Ages

Age 8 to 18 for Basketball
Age 12 to 18 for Volleyball

Participants are divided into divisions based on age

Registration Details

Registrations are accepted in person at the Fort Erie EJ Freeland YMCA or any other YMCA of Niagara Health and Fitness branch.

Basketball registrations are due by October 28, 2019

Volleyball registrations are due by February 3, 2020

Late registrations may be accommodated if space permits, please contact leagues@ymcaofniagara.ca prior to visiting the branch.

Registration Fee

$92.00 Current YMCA Members & $127.00 Community Participants.

Cancellations made in persons/writing 2 weeks or more before the registration deadline will be given a refund minus a $10 administrative fee. Refunds will not be granted for cancellations less than two weeks from the registration deadline. Exceptions for medical reasons can be made by the Coordinator.

Choose the league(s) you would like to register for:

( ) Basketball (fall to winter) ( ) Volleyball (winter to spring)

Indoor soccer registration coming soon! Visit www.ymcaofniagara.org for more information.

Participant Information

Full name: _____ Gender: Male ❐ Female ❐

Birth Date: (year) _____(month) _____ (day) _____ Age: _____

Street Address: _____

City: _____ Province: _____

Postal Code: _____ Home Phone Number: _____

Height: _____ T-shirt Size: _____ Youth ❐ Adult ❐

Grade: _____ # of yrs. playing this sport: _____

At what level? (check all that apply)

( ) School Team ( ) Club Team ( ) Travelling Team

Medical History: (Please list any medical conditions that we should be aware of)

_____

_____

Parent/Guardian Information

Full Name(s):

Cell Phone #:

Business Phone #:

Email:

Emergency Contact Name and Phone Number (other then the parent/guardian listed above):

_____

Special Request (nights unavailable, practice location):
We will try our best to accommodate your request but only if it does not sacrifice fairness and quality of the teams in the league

_____

_____

Photo Release:

I give permission for my son/daughter to be a model for the YMCA of Niagara and I hereby assign all rights of the film/photography/videotape/sound recordings to the YMCA. I authorize the use of the same by YMCA of Niagara and those acting with its permission for the purpose to use, reuse and/or broadcast and republish this photograph/videotape recording.

Parent signature: _____ Date: _____

Waiver:

I understand that through participant in sport there is a risk that my son/daughter may be injured through participation. I release the YMCA of Niagara from all liability related to my son/daughter's participation in YMCA Youth Sport Leagues.

I confirm I have properly noted any medical conditions that my son/daughter may have. I confirm that my son/daughter is able to physically participate in the sport I have registered them for. I understand that if my son/daughter receives a concussion in the YMCA Youth Sport Leagues or elsewhere, they will not be permitted to continue to participate until they are physically able.

Players and their parents/guardians are expected to act in a manner that is in line with the YMCA values and fair play. Players who are removed from the league due to inappropriate or harmful behavior will not be granted refunds.

Parent signature: _____ Date: _____

Interested in volunteering as a Coach or Referee?

The YMCA needs individuals who understand the importance of giving back to their community. Being a volunteer at the YMCA, though coaching or refereeing, benefits both you and those involved. No experience is necessary – we will train you!

( ) Yes, I am interested in volunteering ( ) No, I am not interested in volunteering

Note: Non parent/guardians who are interested in volunteer opportunities at the YMCA are asked to see the YMCA membership desk to complete a volunteer application form.

YMCA of Niagara Privacy Statement

As a charitable, community based association; the YMCA of Niagara is committed to protecting your right to privacy. The personal information you share with the YMCA will be used to support the work of the YMCA. For further information please visit ymcaofniagara.org.

Electronic Messages

I give permission for the YMCA to send me electronic messages for YMCA purposes. I understand the YMCA will not send or rent personal information to third parties. I also understand that if I no longer wish to receive further information or to be contacted by the YMCA I can email ymcaprivacy@niagara.ymca.ca

( ) Yes ( ) No