

CHANGE A CHILD'S LIFE

Remember a Coach that made a difference in your life?

Without volunteer coaches, we would not be able to offer our quality Youth Sports Programs. No experience necessary and the majority of our coaches are parents with a similar philosophy to the Y: sportsmanship and fun are primary goals; winning and losing are secondary.

Our insurance company has mandated that we do a background check on all of our volunteers who work with kids. When you complete the "Volunteer Coach" form below, you will be authorizing the Y to do a reference check.

VOLUNTEER COACH 1 REGISTRATION

FIRST NAME: _____ LAST NAME: _____

PHONE: _____

EMAIL: _____

MALE FEMALE DATE OF BIRTH _____

VOLUNTEER COACH 2 REGISTRATION

FIRST NAME: _____ LAST NAME: _____

PHONE: _____

EMAIL: _____

MALE FEMALE DATE OF BIRTH _____

The responsibilities of a coach include promoting the Y philosophy to players, making sure all children get equal playing time, attending a coaches meeting and using yourself as a model of sportsmanship and fair play. The Y will provide you with all the resources you will need to effectively lead a young team through a successful season.



TEAMMATES FOR THE WINTER FRIENDS FOR LIFE.



WINTER YOUTH BASKETBALL LEAGUE
SPENCER FAMILY YMCA
1st - 6th Grade

YOUTH BASKETBALL LEAGUE 2018



WHO:

Boys & Girls 1st - 6th Grade

WHEN:

January 8th - February 24th

Practices: Start week of January 8th

Games: Start Saturday, January 20th

DIVISIONS

GRADE	BOYS	GIRLS	SESSION
1st-2nd	#03171	#03183	18DD
3rd-4th	#03156	#03185	18DD
5th-6th	#03149	#03146	18DD

WHERE:

Practice: Lincoln Elementary School or Spencer Family Y

Games: Spencer Family Y

**REGISTRATION DEADLINE
JANUARY 2nd**

FEES:

Member: \$30 Program Participant: \$60

Late Registration Fee (If Spots Open) after Dec. 26th

Member: \$35 Prog Part: \$70

UNIFORM:

All players that didn't play the first session will receive a shirt to be worn on game days. If players played the first session, they will use the same shirt.

UPDATES & INFORMATION:

Follow the Facebook page: Spencer Family YMCA

QUESTIONS:

Contact Paige Gaedke at pgaedke@spencerymca.org

REGISTRATION

DIVISION		MEMBERSHIP		SHIRT SIZE	
<input type="checkbox"/> 1 st -2 nd	<input type="checkbox"/> Boy	<input type="checkbox"/> Y Member	<input type="checkbox"/>	<input type="checkbox"/> Youth Sm	<input type="checkbox"/>
<input type="checkbox"/> 3 rd -4 th	<input type="checkbox"/> Girl	<input type="checkbox"/> Program Part.	<input type="checkbox"/>	<input type="checkbox"/> Youth Med	<input type="checkbox"/>
<input type="checkbox"/> 5 th -6 th				<input type="checkbox"/> Youth Lg	

PLAYER INFORMATION

First Name _____ Middle Initial _____ Last Name _____

Street Address _____

City _____ State _____ Zip _____

Birthdate _____ Age _____

Grade _____ School _____

PARENT INFORMATION

Name: _____

Phone: _____

Email: _____

LIABILITY WAIVER

I knowingly register my child for this activity and do so at my own risk and personally assume responsibility for any injuries or other damages they may incur as a direct result of their participation. I understand that my child may be included in promotional photos.

This waiver needs to be signed for your child to participate in the Spencer Family YMCA Basketball League.

Parent Signature: _____

Date: _____

FOR OFFICE USE ONLY

Date: _____

Check Cash Credit Card Amount Paid _____

Receipt#: _____