

# COLE CENTER FAMILY YMCA

## BOYS BASKETBALL



Practice Beg wk of Jan 7<sup>th</sup>  
 First Game: Jan 26<sup>th</sup>

**Registration:**  
 Early: August 5<sup>th</sup> – October 27<sup>th</sup>  
 Fees: Mem \$40.00 / Non \$65.00  
 Late: October 28<sup>th</sup> – September 4<sup>th</sup>  
 Fees: Mem \$45.00 / \$70.00  
 \*No refunds will be given after September 4<sup>th</sup>

Team formation: 1<sup>st</sup>/2<sup>nd</sup> grade assigned; 3<sup>rd</sup>/4<sup>th</sup> and 5<sup>th</sup>/6<sup>th</sup> grade will be a draft method by the coaches.  
 PLEASE PRINT ALL INFORMATION

### Participants Information:

Participants Name:	DOB:	Current Grade:
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Shirt Size: (Circle Size)	YS	YM	YL	
	AS	AM	AL	AXL

I give permission for my child to participate in the Cole Center Family YMCA Youth Basketball program. I will not hold the YMCA or any employee, volunteer or official of this organization liable for any injury which may occur during this program. I also understand that YMCA personnel will do everything in their power to prevent such injury. I understand coaches are volunteers and are chosen based upon the Cole Center Family YMCA's selection process that includes a background check through the State of Indiana.

\_\_\_\_\_ Date \_\_\_\_\_ Signature of Parent or Legal Guardian

**Volunteer Information:**  
 I would like to volunteer in the following way

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

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

Volunteer Coaches Needed	Yes	No	Shirt Size
Coach			
Assistant Coach			



**I would be interested in sponsoring a team:**

Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Cole Center Family YMCA PO Box 233 700 S Garden St Kendallville, IN 46755  
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 www.coleymca.net

