



Kick Into Action

Outdoor Soccer Registration

Designed to encourage participation and having fun, kids are taught basic game skills such as dribbling, passing and shooting as well as sportsmanship.

Outdoor Soccer	
Ages	3-10 <i>(must be 3 yrs old by season start date)</i>
Season	June 15-July 30, 2020
Coach Registration	April 27-Until full
Y-Member Registration \$32	May 4-24 online or in office
Community Registration \$48	May 11-24 online or in office



League features

- 6 games per season
- Volunteer coaches
- Practices are typically once a week and scheduled at the discretion of the coach
- Focus on fundamentals and new skill development

Age Divisions/Game Schedule

- Tuesdays or Thursdays (3-4 and 5-6 age divisions)
- Wednesdays (7-8 and 9-10 age divisions)
- All games are scheduled after 6:00pm

Game Schedules: Your games throughout the season will change from week to week and you are not guaranteed to have all your games at your requested home field.

Special Requests

Requests made late are not guaranteed. You may not request a coach and a buddy.

Buddy Request: Your buddy must also request to play with you. You both must also choose the same day, location and division. If the same day, location and division are not chosen, your preferred location will supersede your buddy request. If either registrant registers late, requests may be denied. It is best to register at the same time.

Coach Request: If a coach has placed your child on their team roster, you may register in office before member and community registration begins to guarantee your spot on the team. It is important to know the day, location and division if you are requesting a specific coach. If you do not register for the correct day, location and division as the coach, your preferred location will supersede your buddy request.

Playerspace

We are pleased to announce that **The YMCA Of The Greater Tri-Cities** has partnered with PLAYERSPACE for electronic communication and league management.

What does this mean for you?

After you register for your sports programs with the YMCA, your Sports Director will be using PLAYERSPACE to:

- Assign players to their teams
- Create and share game schedules and onetime events, like picture day
- Communicate with you throughout the entire process

Youth Sports Registration Form

Members \$32 | Community \$48

PLAYER 1	First Name _____	Last Name _____	Date of Birth _____	Age _____	Gender _____
	T-Shirt Size <input type="checkbox"/> Extra Small (2-4) <input type="checkbox"/> Small (6-8) <input type="checkbox"/> Medium (10-12) <input type="checkbox"/> Large (14-16) <input type="checkbox"/> Other _____				
	Team Requests: You May request a specific coach or to play with a buddy. You can only have one special request. You must choose the same day, location, and division as the buddy or coach or your request will not be honored. It is best to register at the same time. Requests made late are not guaranteed.		Option 1: Coach Request _____ Last Name, First Name		
		Option 2: Buddy Request _____			

PLAYER 2	First Name _____	Last Name _____	Date of Birth _____	Age _____	Gender _____
	T-Shirt Size <input type="checkbox"/> Extra Small (2-4) <input type="checkbox"/> Small (6-8) <input type="checkbox"/> Medium (10-12) <input type="checkbox"/> Large (14-16) <input type="checkbox"/> Other _____				
	Team Requests: You May request a specific coach or to play with a buddy. You can only have one special request. You must choose the same day, location, and division as the buddy or coach or your request will not be honored. It is best to register at the same time. Requests made late are not guaranteed.		Option 1: Coach Request _____ Last Name, First Name		
		Option 2: Buddy Request _____ Last Name, First Name			

PLAYER 3	First Name _____	Last Name _____	Date of Birth _____	Age _____	Gender _____
	T-Shirt Size <input type="checkbox"/> Extra Small (2-4) <input type="checkbox"/> Small (6-8) <input type="checkbox"/> Medium (10-12) <input type="checkbox"/> Large (14-16) <input type="checkbox"/> Other _____				
	Team Requests: You May request a specific coach or to play with a buddy. You can only have one special request. You must choose the same day, location, and division as the buddy or coach or your request will not be honored. It is best to register at the same time. Requests made late are not guaranteed.		Option 1: Coach Request _____ Last Name, First Name		
		Option 2: Buddy Request _____			

CONTACT INFORMATION	Address _____		Apt _____	City _____	State _____	Zip _____
	Primary Parent Name _____			Parent 2 Name _____		
	Primary Phone _____	Cell Phone _____	Cell Phone Provider (required for playerspace) _____		Work Phone _____	
	Emergency Name _____			Emergency Phone _____		
	Email (REQUIRED): Emails are used for PLAYERSPACE and allows our coaches and sports department to communicate important information regarding the sports season.					
	<input type="checkbox"/> Sign me up for the Y-Buzz monthly email newsletter <input type="checkbox"/> I am already receiving the Y-Buzz <input type="checkbox"/> No Thank you					

I WANT TO HELP KIDS PARTICIPATE

Please accept my tax-deductible donation to the YMCA Scholarship Fund to ensure all kids in our community can participate, regardless of financial circumstances.

\$5 \$10 \$25

WAIVER & POLICIES

Participation/Liability Release: I am the parent or guardian of the participant. I give my permission for my child to participate in YMCA program activities and to be transported as authorized by the YMCA. I understand that even when every reasonable precaution is taken, an accident can and will sometimes happen. Therefore, in exchange for the YMCA allowing me and/or my child to participate in YMCA activities, I understand and expressly acknowledge that I release, indemnify, and hold harmless the YMCA and its staff, boards, members, volunteers or guests from all liability for any injury, loss or damage connected in any way whatsoever to me or my child's participation in YMCA activities on or off YMCA premises. I understand that this release includes any claims based on negligence, action, or inaction of the YMCA, its staff, boards, volunteers, directors, members or guests.

Insurance: It is the responsibility of every individual, their parent/legal guardian, to provide for their own accident and health coverage while participating in YMCA activities. The YMCA of the Greater Tri-Cities does not provide any accident or health coverage for its participants.

Medical Treatment: If a parent/guardian cannot reasonably be located when my child requires medical attention, I hereby authorize the YMCA to transport my child and consent to any medical and/or surgical treatment of the above-named participant that such staff or medical personnel deem advisable or necessary. I give permission for staff members to administer CPR and/or First Aid if deemed appropriate or necessary.

Permission: I give the YMCA permission to use, photographs, film footage or tape recordings that may include my child's image or voice for purposes of promoting or interpreting YMCA programs without limitation, compensation or obligation.

Refund Policy: There will be a \$5 processing fee on all youth sports registration fee refunds if canceling prior to the start of the season. Once a season begins there will be a \$10 processing fee on all youth sports registration fee refunds. Refunds are only given to the registration fee and not the membership fee. Credit vouchers may be applied to a child's account at 100% and used toward any YMCA program.

I have read and fully comprehend this form and I am voluntarily signing this authorization and liability release form.

Initial here _____	REFUND POLICY: There will be a \$5 processing fee on all youth sports registration fee refunds if canceling prior to the start of the season. There will be a \$10 processing fee on all youth sports registration fee refunds once a season begins. Refunds are only given to the registration fee and not the membership fee. Credit vouchers may be applied to a child's account at 100% and used toward any YMCA program.
Initial here _____	The Zackery Lystedt Law (House Bill 1824) prohibits young athletes who were suspected of sustaining a concussion from returning to the game without the approval of a licensed healthcare provider. Documentation of injury and approval must be provided to the YMCA upon returning.

Parent/Legal Guardian Signature _____	Date _____
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Office Use Only	Player 1: Age Division: _____ Location: _____ Special Request _____
	Player 2: Age Division: _____ Location: _____ Special Request _____
	Player 3: Age Division: _____ Location: _____ Special Request _____