



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY



BASEBALL SEASON IS DRAWING NEAR!

YMCA SPONSORED 1ST – 2ND BOYS BASEBALL CLUB

Program will focus on developing the basic fundamentals needed for baseball.

Practices will start the week of April 23rd. Games may be scheduled with area teams during the season. Coaches will provide information on games and practice schedules. Season will run at least through the end of June. Parents meeting on April 19th at 7PM at the YMCA.

Coaches & Contact Information –

Joe Lydon 712-621-6814

Jeff Sebeniecher 712-621-0613

Registration Details & Fees

Registration deadline is April 20th, 2018.

\$5.00 – Family Membership

\$10.00 – Youth Membership

\$15.00 - Potential Member

PROGRAM FINANCIAL ASSISTANCE AVAILABLE – APPLY @ THE Y!

Registration form on back –OR– Register ONLINE @
[www.mcyymca.com/Online Registration!](http://www.mcyymca.com/OnlineRegistration)

In cooperation with the Red Oak Park & Tree Board



MONTGOMERY COUNTY FAMILY YMCA

101 E. Cherry St, Red Oak, IA 51566

P 712-623-2161 F 712-623-4920 www.mcyymca.com



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1st - 2nd Grade Boy's Baseball Club Registration - Deadline, April 20th, 2018
 (Or register ONLINE @ www.MCYMCA.com/OnlineRegistration)

Participant: _____ Birthdate ____/____/____ Grade: _____
 Mailing Address: _____ City: _____ State: ____ Zip: _____
 Parent/Guardian: _____ Contact # _____ Alternate # _____
 Email Address: _____

I will volunteer Name _____ Contact # _____

COST:	\$5.00	YMCA Family membership	Shirt Size -	YS	YM	YL	Y-XL
	\$10.00	YMCA Youth membership					
	\$15.00	Non-member					

THE UNDERSIGNED parent(s)/guardian(s) of _____, who is a child under the age of 18 years, with understanding of the potential risks of injury to the child by reason of the child's participation in the following activity: **YMCA's 1st - 2nd Grade Baseball Club** does/do hereby consent to the child's participation in the activity.

The potential risks of participation include, but are not limited to, the risk of injury to the child from contact with other participants and contact with or use of equipment used in the activity.

The parent(s)/guardian(s) affirm that by signing this consent each understands that participation of the child is voluntary and that the parent(s)/guardian(s) have explained to the child that this means that the child is free at any time to stop participation in the activity.

By this consent and with the child's continued participation in the activity, the parent(s)/guardian(s) voluntarily accept the risk of injury to the child by reason of the child's participation in the activity.

THE UNDERSIGNED provide the following contact information to obtain consent to treat the child in the event of injury or illness during participation:

_____	_____	_____
Name	Address	Telephone No.

If the contact person named above cannot be reached, the undersigned give consent for supervisory staff to provide the child emergency medical care and treatment and further necessary and reasonable treatment by a licensed professional caregiver selected by supervisory staff.

_____	_____	_____
Parent/Guardian Signature	Print Name	Date

Program Sponsors: Houghton State Bank, Parker Hannifin and Red Oak Chrysler-Dodge-Jeep