



**FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

**Williams YMCA of Avery County
Martial Arts**

**Individual Sign-Up
Ages 14+**

COST

Member \$60 (12 sessions)

Non – Member \$80 (12 sessions)

Register at the YMCA Front Desk or www.ymcaavery.org

REGISTRATION DATES

May 9th - June 10th, 2018

SESSION DATES

Monday & Tuesday

June 11-July 17

6:30-7:30pm

Location:

O'Connell Field House

Our martial arts program gives youth and adults a chance to learn something new. This discipline will help everyone not only become more engaged in physical activity, but also helps teach them self-defense skills. Martial arts will also help individuals who participate become more focused and provide a terrific outlet for everyone.

These classes are not meant to promote fighting. Our focus is on instilling values such as discipline, becoming more self-aware and developing an ability to put mind over matter for all participants regardless of age.

Our class is taught by a highly-trained, professional instructor. We want to make or participant's development and safety a top priority. Everyone will learn the abilities of restraint, focus and control.

YMCA Mission: To put Christian principles into practice through programs that build healthy spirit, mind, and body for all.



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CONSENT FORM

I hereby consent for myself (or child) to participate in the YMCA Martial Arts program and agree to release the YMCA of Avery County, its staff, instructors or participants from any claims that may arise from injuries suffered while participating in sessions and instructional classes.

Further, I authorize the YMCA of Avery County to provide emergency treatment for illness or injury for me (or child) if qualified medical personnel consider the treatment necessary and perform the treatment. I also consent to the release of photos and my name as deemed necessary. I have read all of the above information AND the registration flyer and understand all aspects of the YMCA Athletics Program.

Signature_____

PARTICIPANTS' INFO

Name_____ Phone_____

Email_____

*****Individuals WILL be contacted individually*****

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