



# Youth Creative Movement Spring Gymnastics Registration

**AGES 5-10 Sessions will meet on Mondays.**

**Class will run between 6:00 – 7:00pm**

**Season dates: May 7- July 2, 2018**

## PLAYER INFO

CHILD'S LAST NAME \_\_\_\_\_ CHILD'S FIRST NAME \_\_\_\_\_

AGE \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ MALE \_\_\_\_\_ FEMALE \_\_\_\_\_

ADDRESS \_\_\_\_\_

ARE YOU A YMCA MEMBER? YES \_\_\_\_\_ NO \_\_\_\_\_

MOM'S NAME \_\_\_\_\_ MOM'S PHONE # \_\_\_\_\_

DAD'S NAME \_\_\_\_\_ DAD'S PHONE # \_\_\_\_\_

**EMAIL ADDRESS (PRINT NEATLY!!!):**

\_\_\_\_\_

EMERGENCY CONTACT NAME AND # \_\_\_\_\_

DOES YOUR CHILD: (CIRCLE Y OR N):

Take any medications regularly? **Y or N** Please list \_\_\_\_\_

Suffer from asthma or breathing disorder? **Y or N** Use an inhaler? **Y or N**

Have any allergies? **Y or N** Please describe \_\_\_\_\_

Any other medical conditions that coaches should be aware of

\_\_\_\_\_

***\*\*Please bring your child in comfortable play clothes, a loose t-shirt, shorts and socks with tennis shoes. Kids also need a water bottle!***

***Activities will include stretching, strength building activities and tumbling. This is a non-competitive option and will have many fun elements for the children.***

**CONSENT FORM**

*I hereby consent for my child or ward, \_\_\_\_\_, to participate in the YMCA Youth Sport program and agree to release the YMCA of Avery County, team coaches and league officials from any claims that may arise from injuries suffered by my child or ward while participating in practices, scrimmages or games. Further, I authorize the YMCA of Avery County to provide emergency treatment for illness or injury of my child if qualified medical personnel consider the treatment necessary and perform the treatment. I also consent the release of photos and the name of my child as deemed necessary. I have read all of the above information AND the registration flyer and understand all aspects of the YMCA Sports Program.*

---

Parent/Guardian Signature

---

Date

---

***Questions?***

***James Penley, Director of Athletics***

***[jamesp@ymcaavery.org](mailto:jamesp@ymcaavery.org)***