



# WAYNE COUNTY YMCA MY CLUB REGISTRATION FORM FALL 2022

**Grades:** 6<sup>TH</sup>- 8<sup>TH</sup>

**Session:** September 15<sup>th</sup>- October 20<sup>th</sup> ,2022

**Program Time:** Thursday 6:30 - 7:30 PM

**Program Cost:** Y Members: \$20 Non Y Members: \$35 **Sibling discount:** \$5

**Free:** To those with a family membership

Name: \_\_\_\_\_ Gender: \_\_\_ DOB \_\_\_/\_\_\_/\_\_\_ Age: \_\_\_ Grade: \_\_\_ Member: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_ Employer: \_\_\_\_\_

Cell #: \_\_\_\_\_ Home#: \_\_\_\_\_ Work#: \_\_\_\_\_

Health Concerns: \_\_\_\_\_

Emergency Contact (If parents can't be reached):

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone# \_\_\_\_\_

### Agreement

1. I certify that the participant named above is in normal health and capable of safe participation in this YMCA Program. The participant and/or parent agree to assume the risk of death or personal injury in this program and in whatever location or time it is held. The participant also acknowledges the risk and danger inherent in the activity which includes; but is not limited to, the following: Cuts, burns, scrapes, bruises and other injuries that occur during the course of this session.

2. I assume all risk(s) and hazard(s) incidental to the conduct of this program and release, discharge and covenant not to sue the YMCA or the instructors forever from liability for any and all loss or damage, personal injury, property damage or wrongful death whether caused by any negligence, either active or passive of the Y and the instructors, or otherwise.

3. **Medical Treatment Policy:** I agree that in the event of an emergency in which a parent, guardian, or emergency contact cannot be reached, that Emergency Medical Staff and the YMCA may take appropriate action to best serve the interest of my child. I understand in the case of an emergency situation, when medical attention is necessary, that the participant's parents or guardians will be responsible for any medical cost.

4. I agree to indemnify and hold the Y and instructors harmless from any damages or costs arising out of the participant's (child or myself) injury.

5. I support the YMCA Youth philosophy, which is based on participation, fun, physical fitness and health, skill development, teamwork, fair play, family involvement, and volunteer leadership. I agree to conduct myself with these principles in mind at all times and will not disrupt this or any other Y program or activity.

6. I give permission to the YMCA to use the photograph or likeness of my child for the purpose of educational or promotional matter. Yes or No

7. I am willing to participate as a coach or an assistant in this program. Yes or No

8. I would like to make a gift to help a child play Y Sports. I am adding \$\_\_\_\_\_ to registration for the YMCA Strong Kids Scholarship Fund.

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For Office Use Only:**

Paid: \$ \_\_\_\_\_ Payment Method: \_\_\_\_\_ Date: \_\_\_\_\_ Receipt #: \_\_\_\_\_ Staff: \_\_\_\_\_



# WAYNE COUNTY YMCA FALL 2022 MY CLUB

## Program Information Sheet

- **GRADES:** 6<sup>TH</sup> - 8<sup>th</sup>
- **PROGRAM TIME:** Thursday 6:30 - 7:30PM
- **LOCATION:** Side Room
- **SESSION:** September 15<sup>th</sup>- October 20<sup>th</sup> 2022
- **PROGRAM COST:** Y Member: \$20.00                      Non Y Member: \$35.00
  - **SIBLING DISCOUNT:** \$5.00
  - **FREE:** To those with a family membership
  - **FINANCIAL ASSISTANCE:** Available through an application process.
- **EQUIPMENT:** Tool, paint, wood and other building supplies that will be supplied by the YMCA
- **DRESS CODE:** Dress comfortably, and in clothes that you don't mind getting messy ripped or stained.
- **FOCUS:** During this program we will be enjoying fun games and projects. We will also be working together to help build the parade float for the Halloween parade. Our goal will be to learn new skills that show our creativity and have fun in the process.
- **CANCELLATION POLICY:** If there is severe weather in the area, or the possibility of severe weather, the Y may decide to cancel classes. We will attempt to call participants for cancellations, however, call 570-253-2083 if you are uncertain. If Wayne Highlands School District closes for the day or dismisses early, the program will be cancelled. Credit slips will be issued for classes missed for these purposes only.
- **SOCIAL MEDIA:** Visit us on our website at [www.wcymca.com](http://www.wcymca.com), like us on Facebook, and join the Wayne County YMCA Youth Programs Remind group for news & updates:  
Send Message to: 81010                      Message is: @wcymc



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FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY