



**WAYNE COUNTY YMCA
NERF MADNESS REGISTRATION FORM WINTER 2019**

Grades: 2ND -8th Boys & Girls **Program Time:** Fri 5:30-6:15 (2nd-4th graders) & 6:15-7:00 (5th - 8th graders)

Session I: _____

Program Cost: Per Session Y Members: \$20.00 or \$5.00/night Non Y Members: \$30.00 or \$5.00/night

Sibling Discount: \$5.00 applies per session **Free:** To those on a yearly 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 the YMCA NERF Madness 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 extreme risk and danger inherent in the activity, which includes; but is not limited to, the following: Injuries resulting from running, jumping, tripping, dodging, eye injuries, and all other activities and forms of motion associated with the sport of NERF.
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 Sports 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 a helper 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 my registration for the YMCA Annual Support Campaign.

Parent/Guardian's Signature: _____ Date: _____

For Office Use Only:

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



WAYNE COUNTY YMCA
WINTER 2019
NERF MADNESS

Program Information Sheet

- **GRADES:** 2nd – 8th Grade boys & girls
- **PROGRAM TIMES:** Friday 5:30-6:15 for 2nd-4th graders
Friday 6:15-7:00 for 5th-8th graders
- **Location:** YMCA Gymnasium
- **TWO 6-week sessions this fall:**
Session I: January 11th-February 15th
Session II: February 22nd-March 29th
- **PROGRAM COST:**
 - **COST/SESSION:** Y Member: \$20.00 Non Y Member: \$30.00
 - **SIBLING DISCOUNT:** \$5.00 per session
 - **COST/NIGHT:** \$5.00
 - **FREE:** To those on a yearly family membership
 - **FINANCIAL ASSISTANCE:** Available through an application process
- **EQUIPMENT:** Bring a NERF Toy and Eye Protection. The YMCA will provide the darts.
- **DRESS CODE:** Dress comfortably, and in layers of clothing suitable for athletics.
- **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. Credit slips will be issued for classes missed for this purpose only.
- **SOCIAL MEDIA:** Visit us on our website at 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: @wycm



WAYNE COUNTY YMCA
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www.wcymca.com

FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY