



FOR YOUTH DEVELOPMENT™  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# EVERYBODY PLAYS EVERYBODY WINS



## Youth Basketball and Cheerleading AMERICANA YMCA

REGISTER FOR WINTER BASKETBALL & CHEERLEADING OCTOBER 1- NOVEMBER 8

**Basketball League:** Ages 5-14

**Cheerleading:** Ages 4-13

Basketball participants will receive a Y-Jersey, and end of season award.

Cheerleaders will receive a Y t-shirt and shorts, and end of season award.

Register at: Americana YMCA

Admission Fee: FREE for Members/ Program Participants: Adults \$4 Children \$2

**BASKETBALL:** Games will be played on Saturdays and some weeknights with one hour practice on a weeknight at Copper Mill Elementary, League games may take place at other YMCA locations.

**CHEERLEADING:** Squads will cheer for games on Saturdays with a one hour practice on a weeknight at the Americana YMCA.

### Fees For Cheerleading and Basketball:

**MEMBER:** \$90

**PROGRAM PARTICIPANT:** \$115

AMERICANA YMCA  
4200 Liberty Way  
Zachary, La 70791  
225-654-9622



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**PARTICIPANT CONTACT INFORMATION:**

Name: \_\_\_\_\_ Gender: M/F  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Age: \_\_\_\_\_  
DOB: \_\_\_/\_\_\_/\_\_\_ School or Employer: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

Shirt Size (circle one): **Youth:** XS, S, M, L, XL **Adult:** S, M, L, XL, XXL (some programs may not include shirts)

**If Under 18:**

Mother/Guardian Name: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_  
Father/Guardian Name: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**IF PARTICIPATING IN SPORTS: (Circle one)**

Sport: Basketball, Cheerleading  
If possible, I would like my child to be coached by: \_\_\_\_\_  
If possible, I would like my child to play with: \_\_\_\_\_

**\*refunds are not given for unmet request for coach/team/teammates**

I would like to receive information on volunteer opportunities  
I would like to sponsor a child/adult/family/senior through the YMCA Annual Support Campaign for an additional  \$5  \$10  \$15 Other \$ \_\_\_\_\_

The YMCA of the Capital Area does not provide accident or medical insurance for program participants. I recognize that participation in YMCA sponsored activities may expose myself or my child to risk of injury. I agree to hold the YMCA harmless from any claims, which may occur through participation in any activity at the YMCA or in its programs. In cases of emergency or accident to myself and/or to my child and I am unable to respond or be contacted, I hereby grant the YMCA director or his/her agent to secure proper medical treatment and transportation for myself and/or my child to an appropriate facility for treatment. As a YMCA participant, I authorize the YMCA to use any images taken of myself and/or my child for promotional purposes of the YMCA. I have read and understand the above information and therefore grant myself and/or my child permission to participate in this YMCA Program in accordance with the conditions set forth above.

**Signature of Participant/Parent/Guardian:** \_\_\_\_\_

**Date:** \_\_\_\_\_

The Y is non-profit, community service organization, with a focus on strengthening the community through program that build a healthy spirit, mind and body for all. We appreciate your participation at the Y!

**Receive Text and E-mail Alerts:**

Sign up for the "My Y" system to receive text and email alerts for program and branch updates. The system is free to use and you can unsubscribe at anytime. Find out more by visiting [ymcabr.org/myy](http://ymcabr.org/myy)

