



Total PD _____
 Balance _____
 Staff _____
 Cash CC CK# _____

Athens YMCA
Spring 2010 Youth Programs February 22 - May 21

Membership Annual Draft Qtr
\$216 \$18 \$60

Child's Name _____

****Please Circle Age Group & Days** First Rate is for Y-Member & Second Rate is for Non-Member.**

Soccer Practice Time Games Time
 U -6 M, W 3:30-5 Wed. 5:00 pm \$70/105
 U -8 T, Th 3:30-5 Fri 6:00 pm \$95/140
 U -10 M, W 3:30-5 Sat (TBA) \$95/140
 U -12 T, Th 4:30-6 Sat (TBA) \$95/140

PLEASE CIRCLE

Jersey Size (YS, YM, YL) (AS, AM, AL, XL)
Short Size (YS, YM, YL) (AS, AM, AL, XL)

Flag Football \$95/140 (5 - 12 yrs. old)

5-6 T, TH 3:30-5:00
 7-9 M, W 3:30-5:00
 10-12 T, TH 3:30-5:00

Games on Friday evenings - times (TBA)

Jersey Size: (YS, YM, YL) (AS, AM, AL, XL)

Tae Kwon Do \$100/140

Ages 6-12*

M, W or T, Th 3:30-5:00 _____
 M, W or T, Th 5:00-6:00 _____

*** M, W (beginning levels); T, TH (green belt or higher)**

Modern Dance \$95/140

Ages 7-12 T, TH 3:30-5:00

T-shirt Size: Youth (S, M, L) Adult (S, M, L, XL)

Y-Quest 3:30-5:00 Days Attending

1 Day \$45/80 _____
 2 Days \$85/120 _____
 3 Days \$125/160 _____
 4 Days \$155/190 _____
 5 Days \$185/220 M, T, W, Th, F

Arts & Crafts \$95/140

(M W Ages 8-12) or (T, TH Ages 5-7)
 M, W or T, Th 3:30-5:00

Mt. Biking \$95/140

Ages 8-12 Mon & Wed 3:30-5:00

(Must be an experienced rider)

T-shirt Size: Youth (S, M, L) Adult (S, M, L, XL)

Swim Lessons 3:45-4:45

****Ages 6-12****

M, W or T, TH \$115/150 _____

M, W, F or T, TH, F \$155/190 _____

Teen Fitness

**** 6th grade and up ****

Tues & Thurs 4:30-6:00 \$105/140

TRANSPORTATION

SCHOOL _____

OCONEE COUNTY & OTHER CLARKE COUNTY SCHOOLS TRANS. FEES

(Burney Harris, Clarke Middle, Colham Ferry, Malcolm Bridge Elem., Malcolm Bridge Middle, Oconee Elem., Oconee Primary, Prince Ave, Rocky Branch, High Shoals, South Jackson, St. Joseph's, Cleveland Rd., Timothy Rd., Whitehead)

5 Days 4 Days 3 Days 2 Days 1 Day
 \$160 \$130 \$100 \$70 \$30

CLARKE COUNTY SCHOOLS TRANSPORTATION FEES

Bus Service for Alps, Barrow, Oglethorpe, Timothy and Chase will be provided at no charge courtesy of Clarke County School System.

Please Complete Info on Back!

Child's Name: _____

Sex: _____ Child's Age _____ Birthday _____

Address: _____ City: _____ State: _____ Zip: _____

Father's Name: _____ Cell#: _____ Wrk #: _____

Mother's Name: _____ Cell#: _____ Wrk #: _____

E-Mail Address: _____

Emergency Contact: _____ (relationship) Cell #: _____ Wrk #: _____

Other Contact: _____ (relationship) Cell #: _____ Wrk #: _____

Medical Notes: _____

(Please fill out a Medication sheet if your child is on medications that will need to be distributed during afterschool or camp)

Allergies: _____

Any Special Instructions: (i.e. in case of asthma attack, allergic reactions, etc.) _____

Behavioral Comments: (Please note any behavior comments that would better help us serve your child)

Pick up list: (include anyone who is authorized to pick up your child - babysitters, relatives, friends, etc.) Please inform the Athens YMCA IN WRITING if anyone is NOT allowed to pick up your child.

RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

In consideration for being permitted to utilize the facilities, services, and programs of the YMCA for any purpose, including but not limited to observation or use of facilities or equipment, or participation in any program affiliated with the YMCA, without respect to location, the undersigned, for himself or herself and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such premises and all facilities and equipment thereon and such affiliated programs have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use, or participation.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE, INCLUDING BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY PROGRAM AFFILIATED WITH THE YMCA, WITHOUT RESPECT TO LOCATION, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

- 1. THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the YMCA, its directors, officers, employees, and agents (hereinafter referred to as "releases") from all liability to the undersigned, his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releases or otherwise while the undersigned is in, upon, or about the premises or any facilities or equipment therein, or participating in any program affiliated with the YMCA, without respect to location.
- 2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releases and each of them from any loss, liability, damage, or cost they may incur due to the presence of the undersigned in, upon, or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA whether caused by the negligence of the releases or otherwise.
- 3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE due to negligence of releases or otherwise while in, about, or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA.

THE UNDERSIGNED further expressly agrees that the forgoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of GEORGIA and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements, or inducement apart from the foregoing written agreement have been made.

I HAVE READ THIS RELEASE

Date

Participant's Signature

Date

Parent's or Guardian's signature (if participant is legally a minor)

(PRINTED NAME OF PARTICIPANT OR GUARDIAN)

