



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Itty Bitty Soccer

Age: 4

Must be born between 11/1/14 and 12/31/15

About the Program

In Itty Bitty, we strive to bring about the love of the game for our little guys and gals through fun and encouraging game playing. Kids will learn techniques that will grow their knowledge of soccer and begin to develop a few skills for the sport. Coaches will conduct fun practices and games throughout the duration of the season.

Session Dates

June 18-July 18, 2019

Registration Deadline

Now through June 8, 2019

Days and Times

Practices are on Tuesdays and
games are on Thursday
(except 7/4) at 4:15-5:00 PM OR
5:15-6:00 PM Minimum 9 Children
per session.

Additional Information

- Team shirt included with fee.
- Coaches needed!!
- Shin guards are needed.
- Games and practices held on Church St
Gymnasium grass

Fees

Members: \$30

Program Participant: \$45

Need Financial Assistance?

Financial assistance applications are
available at the YMCA Welcome
Center





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ITTY BITTY SOCCER REGISTRATION

P-R-I-N-T NEATLY

Participant's Name _____
(first) (last)

Birth Date ___/___/___ Age _____ Male Female

Address _____

City _____ State _____ Zip Code _____ Phone # _____

E-Mail: _____

Parent / Legal Guardian _____ Home # _____ Cell# _____

EMERGENCY CONTACT (other than Parent/Guardian)

Name _____ Home # _____ Cell # _____

ITTY BITTY SOCCER WILL BE HELD AT CHURCH STREET GYMNASIUM GRASS
FEES Y Member: \$30.00 Program Participant: \$45.00
Choose Session: __Tues & Thurs 4:15-5:00 PM __Tues & Thurs 5:15-6:00 PM

The Baker County YMCA will not deny participation in any of its youth programs because of an individual's inability to pay the full program fee. Contact the YMCA Fitness Center, 3715 Pocahontas, Monday through Friday for information regarding limited, Financial Aid Applications should be turned in at least two weeks before the sign-up deadline.

WAIVER and AUTHORIZATION. On behalf of my child: I certify that my child is in good physical condition and can participate in the YMCA sports program named above. Every reasonable effort will be made to ensure the safety of the playing fields and facilities, however the YMCA does not assume responsibility for lost or stolen articles or for personal injuries sustained by participants. I realize that there is potential for injury in sports programs and I agree to assume those risks. In the event I cannot be reached in an emergency, I hereby give permission for the physician selected by the coaches, directors or other personnel associated with the program to secure proper treatment and/or hospitalization for my child. Knowing that the YMCA does not carry accident insurance on program participants I will be financially responsible for any medical and/or other charges in connection with my child's participation in the program. I hereby waive, release and hold harmless the YMCA, its sponsors and any and all persons and organizations associated with the program from any and all injuries, negligence, damages and for any claims or causes of action arising from my child's participation in the program. I give permission for media to taken of my child(ren) to be used for YMCA promotional purposes.
BY MY SIGNATURE BELOW I CERTIFY THAT I HAVE READ AND FULLY UNDERSTAND THE FOREGOING

Parent / Legal Guardian Signature

Date

BRING COMPLETED FORM AND FEE TO:		FOR OFFICE USE
Sam-O-Swim Center	Baker County YMCA	Amount Paid \$ _____
580 Baker St.	3715 Pocahontas Rd.	Receipt # _____ Date _____
Baker City, OR 97814	Baker City, OR 97814	
(541)523-8328	(541)523-9622	