

Youth Sports

We Build Strong Kids, Strong Families, Strong Communities

Basketball Camp



WHO

6th – 8th Grade (In Coming)
9th – 12th Grade (In Coming)

WHEN

Mon./Tue./Thu.
July 19th/20th/22nd
6th – 8th Gr. / 1:00 pm – 4:00 pm
9th – 12th Gr. / 8:30 am – 11:30 am

FEE

\$30.00

REGISTRATION

Registration deadline is
Monday, July 19th
\$10 late fee added after July 19th

PROGRAM ASSISTANCE AVAILABLE
Contact Service Desk for more info.

ALGONA FAMILY YMCA
2101 E. McGregor St Algona, IA 50511
515-295-7701 · www.algonaymca.org

PLEASE RETURN THIS PORTION WITH PAYMENT TO THE ALGONA FAMILY YMCA

2010 Summer Basketball Camp

CHILD'S NAME _____ AGE _____ GRADE _____ SCHOOL _____

PARENT'S NAME _____ PHONE NUMBER _____

ADDRESS _____ CITY, STATE, ZIP _____

EMAIL _____ ADD ME TO THE YMCA E-MAIL LIST YES NO ALREADY ON LIST

VOLUNTEERS ARE NEEDED FOR THIS PROGRAM TO BE SUCCESSFUL

I WOULD LIKE TO VOLUNTEER FOR THIS PROGRAM
NO EXPERIENCE IS NECESSARY.

\$30.00

LATE FEE \$10

WAIVER: I DO ACKNOWLEDGE THE RISK OF INJURY IS POSSIBLE WHILE PARTICIPATING IN THIS PROGRAM. I AGREE TO WAIVE ALL CLAIMS AGAINST THE YMCA, STAFF, VOLUNTEERS, COACHES AND SPONSORS OF THIS PROGRAM. I GIVE PERMISSION FOR THE YMCA TO USE PHOTOS, VIDEO FOOTAGE OR TAPE RECORDINGS THAT INCLUDE MY CHILD FOR THE PURPOSE OF YMCA PROMOTIONS. ALL VOLUNTEER COACHES GO THROUGH A YMCA COACHING ORIENTATION

PARENT/GUARDIAN SIGNATURE _____ DATE _____

OFFICE USE: AMOUNT PAID _____ DATE PAID _____ STAFF INT. _____ CASH _____ CHECK# _____ CREDIT/DEBIT _____

