

# YBASKETBALL™

We build strong kids, strong families, strong communities.

## DAILY FAMILY YMCA OF BIXBY YOUTH BASKETBALL 2008-2009 INFORMATION SHEET

**REGISTRATION:** November 3<sup>rd</sup> – November 21<sup>st</sup>. Receive **\$10 off** for registration forms turned in prior to November 14<sup>th</sup>, 9:00p.m.

**AGES:** Youth Basketball is offered for age **groups 3&4, 5&6, 7&8, 9&10, and 11&12.** Ages are determined by your child's age as of November 1<sup>st</sup>.

**COST:** **\$55** for YMCA Members and **\$90** for Non-Members. (\$10 off if received by November 14<sup>th</sup>, 9:00 p.m. A jersey will be provided as well as a medal at the end of the season. **NO GATE FEE!**

**GAME/PRACTICE SITES:** Games and Practices will be played in the Mabee Gym at the Daily Family YMCA.

**PRACTICE BEGINS:** Practices will be held for up to one hour, one evening per week. Your team's coach will determine the day and time of your team's practice.

**SEASON:** An **8-Game season** will be offered in each of the age divisions. Games will be played on Saturdays. Your team's coach will provide you with game schedules, which they will obtain at the Coaches Meeting.

**COACHES MEETING:** League rules, game schedules, and coaching resource materials will be available. Other pertinent league information will also be covered. Coaches will be contacted with the date and time of the meeting. Non-coaches do not need to attend.

Would you like to donate to the "Strong Kids Campaign"?  Yes  No  
Amount: \_\_\_\_\_

Daily Family YMCA of Bixby  
7910 E. 134<sup>th</sup> St. So.  
Bixby, OK 74008

For more information contact Fredy Rivas @ (918) 369-9622



YMCA

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strong families, strong communities.



Visit our website at [www.dailymca.org](http://www.dailymca.org)

DAILY FAMILY YMCA OF BIXBY  
YOUTH BASKETBALL 2008-2009  
REGISTRATION SHEET

PLAYER'S NAME \_\_\_\_\_ AGE \_\_\_\_\_  
(As of November 1<sup>st</sup>)

SCHOOL \_\_\_\_\_ GRADE \_\_\_\_\_

BIRTHDATE \_\_\_\_\_ GENDER \_\_\_\_\_

SHIRT SIZE (circle one): YS (6-8) YM (10-12) YL (14-16) AS AM AL AXL

YMCA MEMBER?       Yes       No

PARENT/GUARDIAN NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

FRIEND REQUEST: \_\_\_\_\_ COACH REQUEST: \_\_\_\_\_  
(One specific child your child wishes to play with)      (A specific coach your child wishes to play for)

HEALTH CONDITIONS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I VOLUNTEER TO BE A:  COACH     ASST. COACH     TEAM PARENT**

By signing this form, I understand that the Daily Family YMCA of Bixby assumes no responsibility for injuries which I or my child may sustain as a result of my (or my child's) physical condition, or resulting from my (or my child's) observation or participation in any activity or use of facilities or equipment used for YMCA activities. I expressly acknowledge on behalf of myself and my heirs that I assume the risk of any injuries and illnesses, which may result from my (or my child's) participation in these activities. I hereby release and discharge the Daily Family YMCA of Bixby; it's agents, servants, and employees from any and all claims for injury, illness, death, loss or damage, which I (or my child) may suffer as a result of my (or my child's) participation in these activities.

PRINT PARENT'S NAME \_\_\_\_\_

PARENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_