



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Registration Info

OPEN NOW
DEADLINE: February 29th, 2024

Season Info

Starting March 6th, 2024
1 Hour practice
FIND DETAILS ON BACK

Ages

Boys & Girls K- 2nd grade

Cost

\$0 for Switz. Co Students
\$20 for Out of County Students

PICK UP YOUR GAME SCORE A SKILL FUN FOR ALL

Youth Basketball Clinic K- 2nd Grade Boys & Girls

Have your Kindergarten, 1st, and 2nd grade boys and girls pick up their game at our basketball clinic. This winter we are offering a 4 week program for children in Kindergarten, 1st, and 2nd grade. This program is both instructional and fun. It is designed to instruct participants on the basic fundamentals and skills of basketball. This clinic is led by the Switzerland County High School Girls Basketball Coaching Staff and players. **ATHLETES ONLY ALLOWED IN THE GYM FOR CLINIC. NO SPECTATORS DUE TO CAPACITY LIMITATIONS.**



Participant Information

K-2nd Grade Boys & Girls Basketball Clinic Registration Form: One participant per form, Please PRINT LEGIBLY! REVERSE SIDE MUST BE COMPLETED IN ADDITION TO WAIVER PROVIDED AT THE Y. Online registration available at www.switzymca.org.

Please select one: Jeff-Craig Elementary School _____ SC Elementary School _____ Out of County _____
Grade (Please circle) K 1st 2nd

NAME: _____ Birth Date ____/____/____

ADDRESS: _____ CITY: _____

STATE: _____ ZIP CODE: _____ CONTACT PHONE # _____

Does your child have any physical conditions that would limit her participation in this program? If yes, please explain

Parent/Guardian Information

Name: _____ Phone: _____

Email: _____

(FINISH BACK SIDE)

Planned Clinic Schedule

Boys Teams

Monday Evenings;

Times: 6:30-7:30pm

March 4th

March 11th

March 18th

March 25th

Girls Teams

Wednesday Evenings;

Times: 6:00-7:00pm

March 6th

March 13th

March 20th

March 27th

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IN PERSON

Switzerland County YMCA

Paper registration form

Or Return lower half of this form to the school or in person to the YMCA.

Season Info

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Ending March 27th

1 Hour practice

SWITZERLAND COUNTY YMCA

1114 West Main St

Vevay, IN 47043

(812)427-9622

www.switzymca.org

For more information, contact:

David Gee

dgee@switzymca.org



Online Sign UP!

Scan this QR CODE!



Emergency Contact Information #1

Name: _____ Phone: _____

Relation to Child: _____

WAIVER: Important! Please read & sign this release IN ADDITION TO ATTACHED WAIVER

All participants must read and sign. I understand that this program carries with it the potential for physical injury and property loss. I hereby assume the risks of participating in this program and certify that I am physically fit, and have not been advised against participation by any qualified health professional. I agree that I hereby waive, release and forever discharge the Switzerland County YMCA, volunteers, Switzerland County Public Schools, and any and all claims, losses, or liabilities for death, personal injury, partial or permanent disability, property damage, medical or hospital bills, theft, or damage of any kind, including economic losses, which may in the future arise out of, or relate to, my participation in or my traveling to or from this program. This release of liability expressly extends to any negligence on the part of any of the parties release herein.

PHOTO PERMISSION: We, participating individual or legal guardian, do hereby grant permission for photos to be used in publicity or brochures to the Switzerland County YMCA.

Signature _____

Legal Guardian Signature _____

(Required for participants under the age of 18 years)