



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

GET IN THE GAME

East Arbor After School Programs

Session: February 6 – March 31, 2017

Registration Dates: January 23 – February 3

YMCA programs are designed to help children have fun while getting active and learn basics of balanced nutrition. The Y offers basketball skills clinic and creative movement (dancing, tumbling, hula hoop and jump rope!) classes after school on Fridays at East Arbor. Classes are open to any East Arbor student in first - fourth grade.

Session Dates: February 10, 17, 24, March 3, 10, 17, 31 (NO PROGRAM MARCH 24)

There are three easy ways to register:

- 1) Return this form and payment to the Y drop box in the East Arbor office.
- 2) Go online to www.annarborymca.org, click on the "REGISTER" button and use keyword "Ypsi".
- 3) Call 734-661-8029 or 734-661-8031.

Learn more about Y program offerings for youth, teens and adults by going to our website and click on the "Ypsilanti Programs" tab - www.annarborymca.org.



Registration Form:

Today's Date: _____ Participant's Name: _____ Gender: M / F

Birth date: _____ Age: _____ School: _____ Grade: _____

Address: _____ City: _____ Zip: _____

Allergies/Special Health needs: _____

Parent/Guardian name(s): _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Emergency Contact Name and Phone: _____

Please select the program for which the participant would like to register:

Program	Day/Time	Location
East Arbor After School Classes		
<input type="checkbox"/> 1 st -4 th Gr. Creative Movement	Friday, 3:30 – 4:45 PM	East Arbor Gym (move to music room)
<input type="checkbox"/> 1 st -4 th Gr. Basketball	Friday, 3:30 – 4:45 PM	East Arbor Gym

(Fee, payment information and permissions are on the reverse side of this sheet.)

Fee and Payment:

Each class costs \$30.00 for the full session. Through the generous contributions of our donors, the Ann Arbor YMCA is able to provide financial scholarships that enable all members of the community to enjoy YMCA programs, regardless of income. If you cannot afford the full price and would like to receive financial assistance, please indicate below what you are able to pay.

Please find enclosed with my registration: (check one)

Full \$30 balance \$20 \$10

If you need additional financial assistance, please contact Colette Hemker at 734-661-8031.

Payment Method: Cash Check (check #): _____

Credit Card: Visa MasterCard Discover

Card Number: _____ Exp: _____

Agreements

Please initial next to each agreement.

1. ___ I understand it is my responsibility to transport my child after the program ends. I will pick them up no later than five minutes after the conclusion of the program.
2. ___ I hereby certify that the participant is in normal health and capable of safe participation in YMCA programs.
3. ___ I assume all risks and hazards incidental to the conduct of the program/s.
4. ___ I hereby authorize the YMCA to obtain medical treatment for the participant in the event that parent/s and emergency contact cannot be reached.
5. ___ I hereby irrevocably allow the Ann Arbor YMCA and its agents to use the participant's photograph, as it pertains to YMCA participation, for promotional efforts without the expectation of any reimbursement.
6. ___ I support the Y's Youth Sports Philosophy, which is based on the YMCA character values, teamwork, good sportsmanship and building kids' self-esteem and the Parent Code of Ethics. *(Contact the Youth Community Program Director for a copy.)*
7. ___ I hereby certify that my child and I have read the State of Michigan Legislation Concussion Information Sheet and agree to the terms and conditions of what to do in the event of a suspected concussion. The concussion information sheet can be found <http://www.michigan.gov/sportsconcussion/>

Signature of Parent/Guardian:

X: _____ Date: _____

For Office Use Only:	
Date Received: _____	Payment included: _____
<input type="checkbox"/> Registered: <input type="checkbox"/> <i>Paid in Full</i> <input type="checkbox"/> <i>Balance Due</i>	
<input type="checkbox"/> Waitlisted <input type="checkbox"/> Missing Information	
<input type="checkbox"/> e-Finesstri Photo Release	
<input type="checkbox"/> Follow-up Contact: _____ on: _____	
Additional Info: _____ _____	
Staff Completing Registration: _____	Date: _____