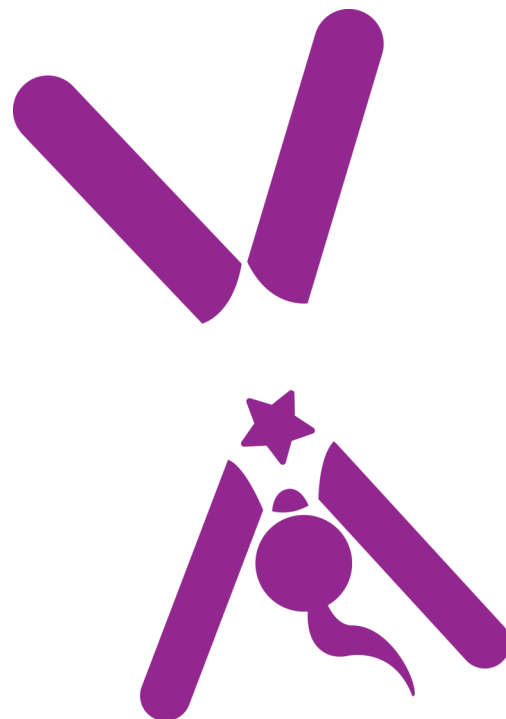




# STRETCH YOUR LIMITS

## Youth Tumbling YMCA OF LENAWEE COUNTY



Our program focuses on floor based tumbling skills for beginners through intermediate levels. The goal is to increase skills and develop proper technique while having fun in a safe environment. Registration open now through October 12, 2019.

- Tiny Tumblers: Ages 3-5
- Tumbling 1 (Beginner): Ages 6 & Up

**WHEN:** Sundays beginning October 13, 2019

**TIME:** Tiny Tumblers: 12:15pm-12:45pm  
Tumbling 1: 12:50pm-1:35pm

**COST:** \$30 Household Membership  
\$50 Non-Members



## Youth Sports Registration & Waiver Form

Sport/Program (*Please Print*): \_\_\_\_\_

**YMCA Membership:** YMCA Member \_\_\_\_\_ Non-Member \_\_\_\_\_

Participant Name: \_\_\_\_\_ Gender: M F Birthdate: \_\_\_\_\_

Age as of Start of Program: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Medical Conditions: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### **Waiver and Release**

1. I hereby certify that my child is in normal health and is capable of safe participation in the program indicated above. I assume all risks and hazards incidental to the conduct of this program. I hereby authorize the YMCA of Lenawee County to obtain medical treatment for my child in the event that the parent and emergency contact cannot be reached.
2. I hereby release the YMCA of Lenawee County and any associated persons or employees from any claims for any injuries, personal losses, or damage done to personal property while on the premises of either the YMCA of Lenawee County, or properties associated with specific programs of the organization.
3. I agree to indemnify and save harmless the YMCA of Lenawee County from any claims or demands arising out of any such injuries or losses.
4. I authorize the publication of any photography taken for or during this program for the use of promoting or advertising further programs, unless I notify the YMCA of Lenawee County, of my desire to not permit any published photos at the time of registration.
5. I certify that I (the parent or guardian) and my child HAVE READ the MDCH concussion information found online at [http://michigan.gov/documents/mdch/ParentsFactSheet\\_415323\\_7.pdf](http://michigan.gov/documents/mdch/ParentsFactSheet_415323_7.pdf) and [http://michigan.gov/documents/mdch/AthletesFactSheet\\_415324\\_7.pdf](http://michigan.gov/documents/mdch/AthletesFactSheet_415324_7.pdf), on the YMCA website under Youth Sports, or at the YMCA front desk.

***\*By signing below I certify that I have read, agree to, and have done all actions indicated in the five (5) points listed above.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_