



2024 Illinois Valley YMCA Flag Football—Registration Form

GRADE DIVISIONS	K- 2 nd / 3 rd -4 ^t	^h / 5 th -6 ^{th.}	COST			
EARLY REGISTRATION	May 13 th -Jun	e 7 th	Mem	bers \$55	5 Non-Members \$75	
OPEN REGISTRATION	June 8 th —Au	ugust 4 th	Mem	bers \$65	5 Non-Members \$85	
\$10 Discount for Early I	Registration.					
Financial assistance is	available. No	one is turned a	away due	to an in	ability to pay.	
COACHES' MEETING	Monday, Aug	gust 12, 2024, fr	om 6:00-	–7:30 p.	m. (in conference Room at YMCA)	
PHOTO DAY pictures. Photos will be		•		•	30-40 minutes before gametime for t the YMCA.)	
PRACTICE BEGINS coaches' meeting)	Week of Aug	gust 19th, 2024	(schedul	es will b	e announced within a week of the	
GAME SEASON (6 games and all played	•			•	d 1 hour of practice a week. day makeup will be done Oct. 19th)	
What days and Time a	re available to	practice? (Circ	le days an	nd put fro	om when to when, M 5pm-8pm)	
М	т		w		ТН	
		**Player In	formation	**		
Player Name						
Member Type:	Member / No	on-Member	Gend	ler:	Male / Female	
T-Shirt Size YS	YM YL	AS AM	AL	AXL	Birth Date//	
School Attending					Grade	
Skill Level (Circle One) (A =New to Sport / B =	A Has played Fla	B C ng or Tackle Foo	tball/ C –	Has Play	red Multiple years)	
	**E	Emergency Con	tact Infor	mation*	*	
Parent or Guardian Na	me(s)					
Parent's Email			Addre	ess		
City			Zip C	ode		
Cell Phone			2 nd Pl	hone		

Special Player/Coach Request

Requests (ONE Player or Coach)

We try to accommodate requests but cannot guarantee. The Illinois Valley YMCA reserves the right to modify rosters. Available days and siblings will get top priority for schedule and teams.

	**Volunte	er Coaching			
Head Coach	Assistant Coach	Gender?	M/F		
First Name	Last Name				
Phone Number (If diffe	rent from above)				
Email Address				Shirt Size	

Photo Release

I hereby acknowledge that the Illinois Valley YMCA may use photos or videos taken of myself or my child for use in publications online, in print, or in other company publications. I release and hold harmless the YMCA from any reasonable expectation of privacy or confidentiality associated with the images specified above. I also acknowledge I will receive no financial compensation for the use of such materials.

Agree

Disagree

Waiver of Liability

I hereby, for myself and my child, waive and release all rights and claims that I may have against the Illinois Valley YMCA and its associates and/or volunteers. I understand that my child participates at his/her own risk and that I have insurance that will cover injuries that he/she may incur.

Parent/Guardian Signature ______ Date _____

(FOR OFFICE USE ONLY) Attach Receipt if possible.

Payment Amount \$_____

Payment Received Date ____/____

Receipt#_____

Staff Initials_____



FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY

Illinois Valley YMCA – Volunteer Coaching Contract

I understand that my responsibilities as an Illinois Valley YMCA Youth Sports coach are of great importance and that my actions have the potential to significantly influence the youth athletes that I coach. Therefore, I promise to uphold the following rights of our young athletes to the best of my ability.

- 1. Right to participate in YMCA sports programs
- 2. Right to participate at a level commensurate with each child's maturity and ability
- 3. Right to have qualified adult leadership
- 4. Right to play as a child and not as an adult
- 5. Right of children to share in the leadership and decision-making of their sport participation
- 6. Right to participate in safe and healthy environments
- 7. Right to proper preparation for participation in sports
- 8. Right to an equal opportunity to strive for success.
- 9. Right to be treated with dignity
- 10. Right to have fun in sports

I also promise to conduct myself in accordance with the Code of Ethics for Coaches as given next.

- 1. I will treat each athlete, opposing coach, official, parent and administrator with dignity.
- 2. I will do my best to learn the fundamental skills, teaching and evaluation techniques and strategies of my sport.
- 3. I will become thoroughly familiar with the rules of my sport.
- 4. I will become familiar with the objectives, rules and penalties of the Illinois Valley YMCA Youth Sports program with which I am affiliated. I will strive to achieve these objectives and communicate them to my athletes and their parents.
- 5. I will uphold the authority of officials who are assigned to the contests in which I coach and I will assist them in every way to conduct fair and impartial competitive contests.
- 6. I will learn the strengths and weaknesses of my athletes so that I might place them in situations where they have a maximum opportunity to achieve success.
- 7. I will conduct my practices and contests so that that all athletes have an opportunity to improve their skill level through active participation.
- 8. I will communicate to my athletes and their parents the rights and responsibilities of individuals on our team.
- 9. I will cooperate with the Program Director of our organization in the enforcement of the rules and regulations and in the evaluation process for coaches. I will report any irregularities that violate sound competitive practices.
- 10. I will protect the health and safety of my athletes by insisting that all of the activities under my control are conducted for their psychological and physiological welfare.

With my signature, which I voluntarily affix to this contract, I acknowledge that I have read, understood and will do my best to fulfill the promises made herein. I have read and will abide by the Illinois Valley YMCA's zero tolerance policy in the way that I communicate and behave while participating in this program.

Coach Name:	Date	
Coaches Signature:	Date	
Program Director Signature:	Date	

BACKGROUND CHECK AUTHORIZATION

I understand as part of my employment/volunteering, the YMCA will conduct a criminal background check prior to and during my employment/volunteering as well as a child abuse registry check and I am subject to random, accident follow-up, and for cause drug testing, as well as post offer drug screening contingent on employment. Initial_____

I am not a child molester, abuser or pedophile, and have not been accused of being a molester or abuser. Initial_____

Information needed to run the criminal and sex offender background check:

Signature:		_ Date:	_
DATE OF BIRTH:	PHONE NUMBER:		
CITY:	STATE:	ZIP:	
ADDRESS:			
MALE FEMALE			
NAME: (PLEASE PRINT)			



Each Student/Player Receives a Code. No Money or Orders Due on Picture Day!

the website and entering your code. If you visit prior to the Photos will be posted online and can be viewed by going to Use the Code to See Photos Online

when the photos are there. Photos should be posted within 1 week of picture day. photos being available, please sign in! You will be notified

Order Photos Online...

able to order online. the day of pictures. Please contact us directly if you are not See your photos & order online. We will not accept orders on

release. Photos can be printed at your photo lab of choice instructions via email. Digital downloads include a print Purchase a digital download online & receive download

TO ACCESS PICTURES

Use your phone's camera to hover here, then enter your student/player's code



or go to JHStudioOnline.com

You will be notified when pictures are available. If pictures aren't available, SIGN IN!