



MIGHTY MITE FLAG FOOTBALL

SEPTEMBER 9 - OCTOBER 14, 2017

Kindergarten - Grade 2 in Fall 2017

Come and join us for six weeks of flag football fun! Each week, time will be given to skill development, as well as game play. Youth will learn the importance of sportsmanship, teamwork and the value of being a team player. Volunteer coaches are needed for the success of this program. Each Saturday, one half hour of skill development practice with the volunteer coach will be followed by a half hour game. Participants are put on teams based on their grade and school. The fee includes a team colored t-shirt.

- **On Saturday, September 9, registered players should plan to attend a skills clinic from 12:30pm - 1:30pm.** Players will meet their coach at the clinic.
- The skills clinic, practice and all games will be held at Vollrath Park Bowl, which is on North 3rd Street between Vollrath Boulevard and Park Street.
- Games begin on Saturday, September 16. Game times are 12:30pm, 1:30pm or 2:30pm.
- **The registration deadline is August 18, 2017.**



For more information, please contact Matt at 920-451-8000 x117 or mmueller@sheboygancountymca.org and Ashley at 920-451-8000 x182 or arietbrock@sheboygancountymca.org.



SHEBOYGAN YMCA 2017 MIGHTY MITE FLAG FOOTBALL LEAGUE

Please return to the Sheboygan YMCA at the address or fax number (credit card only) listed above.

Child's Name _____ Grade Fall 2017 _____ Birth Date _____ M F
 Address _____ City _____ State _____ Zip _____
 Phone 1 _____ Phone 2 _____ School _____
 Parent/Guardian _____ Email _____

Volunteer Coach

Name _____ Phone # _____ Email _____

Grade Fall 2017

- Kindergarten
 Grade 1
 Grade 2

T-Shirt Size

- Youth SM Adult SM
 Youth MD Adult MD
 Youth LG Adult LG

Fee

- \$27.00 YMCA Family Member
 \$29.00 YMCA Youth Member
 \$44.00 Participant

HOLD HARMLESS AGREEMENT

I hereby agree to waive any claim or liability I may have on the YMCA arising out of use of the facility, and further agree that I will indemnify and save harmless the YMCA from any and all claims brought against the YMCA, its members and volunteers, on account of death, injury, or damage to persons or property received by any persons by reason of the acts or omissions of the users in their use. I also agree to waive any claims against the YMCA, its members and volunteers for injuries or damages that may result from the conduct of other persons, including participants in the program. I understand the above responsibilities and I give permission for my child to participate and be photographed in YMCA activities.

Parent Signature _____ **Date** _____

Receipt # _____ Date _____ Amount Paid _____ Recd By _____