

SHEBOYGAN YMCA

812 Broughton Drive, Sheboygan, WI 53081

P 920-451-8000 • F 920-451-8019

www.sheboygancountyymca.org



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY



HIGH SCHOOL 6'S SUMMER BEACH VOLLEYBALL THURSDAYS, JUNE 14 - AUGUST 9, 2018

Students in Grade 9 to 2018 High School Graduates

Come and join the fun of this 8-week coed high school summer beach volleyball league! All matches will be officiated. Please contact Matt at mmueller@sheboygancountyymca.org or 920-451-8000 x117 for more information.

- Matches will be played at Deland Park, which is across the street from the Sheboygan YMCA.
- Matches will be played between 5:30pm - 8:45pm on Thursday. There will be a play-off the last night of the league. Championship t-shirts will be given to the winners.
- Schedules will be emailed to the team captains before the season begins.
- **The registration deadline is May 31, 2018.**



SHEBOYGAN YMCA 2018 HIGH SCHOOL 6'S SUMMER BEACH VOLLEYBALL LEAGUE

Please return to the Sheboygan YMCA, 812 Broughton Drive, Sheboygan, WI 53081

Team Name _____ Captain _____

Address _____ City _____ State _____ Zip _____

EMAIL required _____ Phone 1 _____ Phone 2 _____

PLEASE CHECK THE BOX IF YOU ARE A YMCA MEMBER

Player Name	Phone #	Player Name	Phone #
1. _____	<input type="checkbox"/>	6. _____	<input type="checkbox"/>
2. _____	<input type="checkbox"/>	7. _____	<input type="checkbox"/>
3. _____	<input type="checkbox"/>	8. _____	<input type="checkbox"/>
4. _____	<input type="checkbox"/>	9. _____	<input type="checkbox"/>
5. _____	<input type="checkbox"/>	10. _____	<input type="checkbox"/>

HOLD HARMLESS AGREEMENT

I hereby agree to waive any claim or liability 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 of every kind and description which may be brought against the YMCA on account of death, injury or damage to persons or property received by any persons by reason of acts or omissions of the users in their use. I understand the above responsibilities and I give permission for my team to participate and be photographed in YMCA activities.

Captain's Signature _____ Date _____

TEAM FEE

- \$139.00 Team Fee
\$20.00 discount > 3 YMCA members on team

Receipt # _____ Amount Paid _____ Rec'd By _____ Date _____

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