



SPRING 7 VS 7 FLAG FOOTBALL LEAGUE SATURDAYS, APRIL 13 - JUNE 1, 2024

for Boys and Girls in Grades 5K - Grade 5

Come join this 7 vs 7 flag football league! This program provides an excellent opportunity for youth to participate with others in a healthy activity led by volunteer coaches. The emphasis is on sportsmanship, skill development, teamwork, participation and doing one's best. This 7-week league includes competition from Sheboygan County. This is an individual registration program. **The registration deadline is March 21, 2024.**

- Teams will practice one night each week. Games will be played on Saturdays beginning at 12:00pm at Sheboygan Falls High School, Sheboygan Falls River Park or Sheboygan Vollrath Park (bowl). If there is inclement weather or poor field conditions, coach will have to make up games during the week during practice time.
- Teams will be combined by grade: 5K/1, 2/3 and 4/5.
- Each team will have a coach and will be given matching team t-shirts. Teams will have up to 10 players.
- Practice will begin one week before games start.
- Game format will consist of two 20-minute halves with running clock with a 5-minute half time.
- No games the weekend of May 25th (Memorial Day weekend).
- For more information, please contact:
 Ashley920-467-2464 x207 or aliermann@sheboygancountyyymca.org
 Taylor920-451-8000 x121 or tzastrow@sheboygancountyyymca.org



SHEBOYGAN COUNTY YMCA 2024 SPRING 7 VS 7 FLAG FOOTBALL LEAGUE

Please return to the YMCA at 305 Buffalo St, Sheboygan Falls, WI 53085 or 812 Broughton Dr, Sheboygan, WI 53081

Name _____ Birth Date _____ Grade _____ M F
 Address _____ City _____
 State _____ Zip Code _____ Phone 1 _____ Phone 2 _____
 Email _____ School _____
Emergency Contact _____ **Phone #** _____

Parent Volunteer Coach

Name _____ Phone _____ Email _____

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 myself and/or my child to participate and be photographed in YMCA activities.

Parent Signature _____ **Date** _____

<input checked="" type="checkbox"/> Grade	<input checked="" type="checkbox"/> Community 24S1 1Y.. OR 2Y..	<input checked="" type="checkbox"/> T-Shirt Size	<input checked="" type="checkbox"/> Fee
<input type="checkbox"/> Grades 5K-1	<input type="checkbox"/> Cedar Grove 1YLEAGFBALL...	<input type="checkbox"/> Youth SM	<input type="checkbox"/> \$27.00 Sheboygan County YMCA Family Member
<input type="checkbox"/> Grades 2-3	<input type="checkbox"/> Howards Grove 2YLEAGFBALL...	<input type="checkbox"/> Youth MED	<input type="checkbox"/> \$29.00 Sheboygan County YMCA Youth Member
<input type="checkbox"/> Grades 4-5	<input type="checkbox"/> Kohler 2YLEAGFBALL...	<input type="checkbox"/> Youth LG	<input type="checkbox"/> \$44.00 Participant
	<input type="checkbox"/> Oostburg 1YLEAGFBALL...	<input type="checkbox"/> Adult SM	
	<input type="checkbox"/> Plymouth 2YLEAGFBALL...	<input type="checkbox"/> Adult MED	
	<input type="checkbox"/> Sheboygan 1YLEAGFBALL...	<input type="checkbox"/> Adult LG	
	<input type="checkbox"/> Sheboygan Falls 2YLEAGFBALL...		

Email form to:
aliermann@sheboygancountyyymca.org OR
tzastrow@sheboygancountyyymca.org

Payment

Cash Check Credit Card # _____ Exp Date _____ 3 Digit Code _____

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