

SHEBOYGAN FALLS YMCA

305 Buffalo Street, Sheboygan Falls, WI 53085

P 920-467-2464 • F 920-467-4641

www.sheboygancountymca.org



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

MARCH MANIA 3 VS 3 BASKETBALL TOURNAMENT

SATURDAY, MARCH 15, 2025



Boys and Girls in Grades 2 - 3

End the basketball season with a bang! Get your team into March madness as well and sign up for the March Mania 3 vs 3 Basketball Tournament. Rules and schedules will be emailed to coaches a week before the tournament.

- Games will be played at the Sheboygan Falls YMCA
- Each team guaranteed 3 games
- If possible, grades will be separated
- Hoops will be set at 9 feet

For more information, please contact Leondre at ltownsend@sheboygancountymca.org or 920-467-2464 x207. **The registration deadline is March 3, 2025.**

2025 MARCH MANIA 3 VS 3 BASKETBALL TOURNAMENT

Please return to the Sheboygan Falls YMCA, 305 Buffalo Street, Sheboygan Falls, WI 53085

Team Name _____

Coach _____ Birth Date _____ M F

Email Required _____ Phone 1 _____ Phone 2 _____

Address _____ City _____ State _____ Zip _____

Player Name	Grade	Player Name	Grade
1. _____	_____	4. _____	_____
2. _____	_____	5. _____	_____
3. _____	_____		

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 team to participate and be photographed in YMCA activities.

Coach's Signature _____ Date _____

FEE PER TEAM

\$70.00

BOYS

2nd grade

3rd grade

GIRLS

2nd grade

3rd grade

Email form to:

ltownsend@sheboygancountymca.org

PAYMENT

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

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