

SHEBOYGAN FALLS YMCA

305 Buffalo Street, Sheboygan Falls, WI 53085

P 920-467-2464 • F 920-467-4641

www.sheboygancountyyymca.org



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

FALL 2025 CO-ED MIGHTY MITE SPORTS

Participation, FUNdamentals, skill development and sportsmanship are the focus of this program. Participants are put on teams based on their grade or school. Each week, volunteer coaches will spend half the class working on skills. Games are played during the 2nd half of class. The fee includes a t-shirt, except for tennis.

MIGHTY MITE TENNIS

SEPTEMBER 9 - OCTOBER 21, 2025

Boys and Girls in Grades 3-8

Tues 4:00pm - 5:00pm

MIGHTY MITE SOCCER

SEPTEMBER 11 - OCTOBER 23, 2025

Boys and Girls in 5K - Grade 2

Thurs..... 4:00pm - 5:00pm

MIGHTY MITE BASKETBALL

OCTOBER 28 - DECEMBER 16, 2025

Boys and Girls in 5K - Grade 2

Tues 5:00pm - 6:00pm

TEAM CHALLENGES

SEPTEMBER 8 - OCTOBER 20, 2025

Boys and Girls in Grades 1 - 3

A class that is the perfect blend of movement, friendship, and fun. This class is ideal for kids who love to play, work together, and rise to new challenges as a team. Each week will have new challenges such as obstacle course, relay races, and games with balls.

Mon..... 5:30pm - 6:15pm

KIDS NIGHT OUT

NOVEMBER 7, 2025

Boys and Girls in Grades 2 - 4

Kid's Night Out includes a variety of activities such as sports, games, crafts and a snack, while encouraging positive character development and social interaction.

Fri 6:00pm - 8:00pm

Contact: Halle Boldt for more information:
(920)467-2464 or hboldt@sheboygancountyyymca.org

SHEBOYGAN FALLS YMCA 2025 FALL MIGHTY MITE PROGRAMS

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

Parent/Guardian _____ Birth Date _____ ☐ M ☐ F
Email _____ Phone _____
Child _____ Birth Date _____ Grade _____ ☐ M ☐ F
School _____
Address _____ City _____ State _____ Zip _____

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 _____

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|--|--|--|---|
| <input checked="" type="checkbox"/> Mighty Mite Sports | <input checked="" type="checkbox"/> T-Shirt Size (not tennis) | <input checked="" type="checkbox"/> Team Challenges | <input checked="" type="checkbox"/> Kids Night Out |
| <input type="checkbox"/> Soccer - Fall 1 | <input type="checkbox"/> Youth XS | <input type="checkbox"/> Fall 1 | <input type="checkbox"/> November 7 |
| <input type="checkbox"/> Tennis - Fall 1 | <input type="checkbox"/> Youth SM | | |
| <input type="checkbox"/> Basketball - Fall 2 | <input type="checkbox"/> Youth MD | <input checked="" type="checkbox"/> Fee | <input checked="" type="checkbox"/> Fee |
| <input checked="" type="checkbox"/> Fee | <input type="checkbox"/> Youth LG | <input type="checkbox"/> \$32.00 Family Member* | <input type="checkbox"/> \$6.00 Family Member* |
| <input type="checkbox"/> \$39.00 Sheboygan County YMCA Family Member | | <input type="checkbox"/> \$37.00 Youth Member* | <input type="checkbox"/> \$7.00 Youth Member* |
| <input type="checkbox"/> \$44.00 Sheboygan County YMCA Youth Member | | <input type="checkbox"/> \$55.00 Non-Member | <input type="checkbox"/> \$9.00 Non-Member |
| <input type="checkbox"/> \$59.00 Non-Member | | *Sheboygan County YMCA Member | |

Email form to: hboldt@sheboygancountyyymca.org

Payment

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

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