

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 YOUTH SPORTS PROGRAMS

SPORTS OF ALL SORTS

SEPTEMBER 12 - OCTOBER 24, 2025

Boys and Girls in Grades 1 - 4

If you are looking for something fun to do, come join our after school sports program. Each week we will play a different sport for an afternoon of fun!

Fri 4:00pm - 4:45pm



REC GAMES

OCTOBER 31 - DECEMBER 19, 2025

Boys and Girls in Grades 2 - 4

Run! Play. Laugh. Repeat! This action-pack class is all about fun, friendship, and movement. "Rec Sports" introduces kids to a variety of team games and active play, blending the excitement of sports with the joy of just having a good time. From classic playground favorites to creative new games, there is something for everyone! Whether your child is a sports lover or just wants to burn off energy and have fun. It's non-competitive, inclusive and focused on teamwork, skill building, and smiles from start to finish.

Fri 4:00pm - 4:45pm



INTRO TO SPORTS

OCTOBER 27 - DECEMBER 15, 2025

Boys and Girls in Grades 3-5

This class is the perfect starting point for both boys and girls who are new to sports. This class introduces fundamental skills across a variety of sports in a relaxed, fun, and supportive environment. With an emphasis on basic techniques and fundamentals, but an importance on fun!

Mon 5:30pm - 6:30pm



GAGA BALL/DODGEBALL

OCTOBER 28 - DECEMBER 26, 2025

Boys and Girls in Grades 1 - 5

Grab your friends and come join us for fun playing gaga ball and different dodgeball games. It is a great way to burn off some steam!

Tues 4:00pm - 4:45pm



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

SHEBOYGAN FALLS YMCA 2025 FALL YOUTH SPORTS 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 _____

<input checked="" type="checkbox"/> Sports of All Sorts	<input checked="" type="checkbox"/> Rec Games	<input checked="" type="checkbox"/> Intro to Sports	<input checked="" type="checkbox"/> Gaga Ball/Dodgeball
<input type="checkbox"/> Fall 1	<input type="checkbox"/> Fall 2	<input type="checkbox"/> Fall 2	<input type="checkbox"/> Fall 2
<input checked="" type="checkbox"/> Fee	<input checked="" type="checkbox"/> Fee	<input checked="" type="checkbox"/> Fee	<input checked="" type="checkbox"/> Fee
<input type="checkbox"/> \$7.00 Family Member*	<input type="checkbox"/> \$7.00 Family Member*	<input type="checkbox"/> \$28.00 Family Member*	<input type="checkbox"/> \$7.00 Family Member*
<input type="checkbox"/> \$9.00 Youth Member*	<input type="checkbox"/> \$9.00 Youth Member*	<input type="checkbox"/> \$31.00 Youth Member*	<input type="checkbox"/> \$9.00 Youth Member*
<input type="checkbox"/> \$12.00 Non-Member	<input type="checkbox"/> \$12.00 Non-Member	<input type="checkbox"/> \$45.00 Non-Member	<input type="checkbox"/> \$12.00 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 _____