

**SHEBOYGAN FALLS YMCA**

305 Buffalo Street, Sheboygan Falls, WI 53085

P 920-467-2464 • F 920-467-4641

[www.sheboygancountymmca.org](http://www.sheboygancountymmca.org)



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

**PEE WEE SPORTS - PARENT/CHILD CLASS**

**for Children Ages 3 - 5 with Parent**

This program is designed for parents and children to learn and develop different sport skills together in a fun environment. Sports change each session and include basketball, football, soccer, tennis, t-ball and other gym games.

**PEE WEE BASKETBALL**

**March 5 - April 16, 2025**



Wed..... 5:00pm - 5:45pm

**MIGHTY MITE SPORTS**

**Boys and Girls in Kindergarten - Grade 2**

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 2<sup>nd</sup> half of class. The fee includes a t-shirt.

**MIGHTY MITE BASKETBALL**

**March 4 - April 15, 2025**



Tues ..... 5:00pm - 6:00pm



For more information, please contact:  
Leondre Townsend  
[ltownsend@sheboygancountymmca.org](mailto:ltownsend@sheboygancountymmca.org)  
Phone: 920-467-2464 x207

**SHEBOYGAN FALLS YMCA 2025 SPRING I PEE WEE / 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 \_\_\_\_\_

- |   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> <b>Pee Wee Sport</b>        | <input checked="" type="checkbox"/> <b>Mighty Mite Sport</b>    | <input checked="" type="checkbox"/> <b>T-Shirt Size</b> |
| <input type="checkbox"/> Basketball                             | <input type="checkbox"/> Basketball                             | <input type="checkbox"/> Youth XS                       |
| <input checked="" type="checkbox"/> <b>Fee</b>                  | <input checked="" type="checkbox"/> <b>Fee</b>                  | <input type="checkbox"/> Youth SM                       |
| <input type="checkbox"/> \$28.00 Sheb County YMCA Family Member | <input type="checkbox"/> \$36.00 Sheb County YMCA Family Member | <input type="checkbox"/> Youth MD                       |
| <input type="checkbox"/> \$32.00 Sheb County YMCA Youth Member  | <input type="checkbox"/> \$39.00 Sheb County YMCA Youth Member  | <input type="checkbox"/> Youth LG                       |
| <input type="checkbox"/> \$52.00 Non-Member                     | <input type="checkbox"/> \$54.00 Non-Member                     |   |

Email form to: [ltownsend@sheboygancountymmca.org](mailto:ltownsend@sheboygancountymmca.org)

**Payment**

Cash  Check  Credit Card # \_\_\_\_\_ Exp Date \_\_\_\_\_ 3 Digit Code \_\_\_\_\_

Receipt # \_\_\_\_\_ Amount Paid \_\_\_\_\_ Rec'd By \_\_\_\_\_ Date \_\_\_\_\_