

## SHEBOYGAN FALLS YMCA

305 Buffalo Street, Sheboygan Falls, WI 53085

P 920-467-2464 • F 920-467-4641

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



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY



## 3-POINT & FREE THROW CONTESTS

### FRIDAY, MARCH 13, 2026

### for Children in Grades 2 - 3 with Parent

Come to the Sheboygan Falls YMCA for these fun 3-point and free throw contests! Prizes will be given to 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> place. For more information or if you have questions, please contact Halle at [hboldt@sheboygancountyyymca.org](mailto:hboldt@sheboygancountyyymca.org) or 920-467-2464 x207.

- **Children in grades 2 - 3 will play with a parent.**

Points will be combined between the parent and child. Parents will use an official size basketball and children will use a junior size basketball. Hoops will be set at 9 feet. **The fee is per team of two.**

### Grades 2 - 3

Friday ..... Contest Starts at 6:00pm



### SHEBOYGAN FALLS YMCA 2026 3-POINT & FREE THROW CONTESTS

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

Parent Participant \_\_\_\_\_ Birth Date \_\_\_\_\_ ☐ M ☐ F

Email \_\_\_\_\_

Child's Name \_\_\_\_\_ Birth Date \_\_\_\_\_ ☐ M ☐ F

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

### 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 \_\_\_\_\_

- ☒ **Grades 2-3 Team Fee** (register child for contest)  
☐ \$10.00 Sheboygan County YMCA Family Member  
☐ \$12.00 Sheboygan County YMCA Youth Member  
☐ \$16.00 Non-Member

Email form to: [hboldt@sheboygancountyyymca.org](mailto:hboldt@sheboygancountyyymca.org)

### Payment

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

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