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**21st Annual Girls & Sports Day**

 **Saturday, September 30th, 2023**

**12:00pm - 5:30pm**

James Family Prescott YMCA ● 750 Whipple St, Prescott

Cost: $15.00 Pre-Registration/$20.00 Day of Event

(no refunds, transfers, or credits)

Please *register early* as we expect to fill all 150 spaces

**Drop off or mail registrations to the Prescott YMCA, 750 Whipple St. Prescott, AZ 86301**

First Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Age\_\_\_\_ Birthdate\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_ Age Group (circle one): 7-8 9-10 11-14

School Attending\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade\_\_\_\_\_\_\_

Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (for information and reminders)

Mother’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell/Pager\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell/Pager\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone # and contact name day of event\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Allergies or conditions that may limit activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you hear about Girls & Sports Day? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Previous Participant? (circle) Yes No If yes, how many years? \_\_\_\_\_\_\_

For grant purposes only - Ethnicity \_\_\_\_\_\_\_\_\_\_\_\_\_

I acknowledge that participants cannot be guaranteed a risk-free environment from COVID-19 during this North Star Youth Partnership/Prescott YMCA event. \_\_\_\_ (Initial)

My daughter has my permission to participate in Girls & Sports Day. In case of accident, injury or illness, the Prescott YMCA has my authorization to secure, at my expense, such medical treatment as is deemed necessary. I understand that I will not hold the Prescott YMCA or North Star Youth Partnership responsible for accidents or injury that may occur during the activities. I understand that the Prescott YMCA does not provide medical insurance for participants. I also authorize the Prescott YMCA / North Star Youth Partnership to photograph and / or video my daughter while participating in Girls & Sports Day activities for future display and publications in order to promote this program. I also authorize my daughter to answer any survey questions asked throughout the day.

Parent / Guardian Name (printed)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent / Guardian Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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James Family Prescott YMCA 750 Whipple St. Prescott, AZ 86301 928-445-7221 prescottymca.org

North Star Youth Partnership 434 W Gurley St Prescott, AZ 86301 928-708-7214 northstaryouth.org

