

YMCA OF THE IOWA MISSISSIPPI VALLEY Program Registration Form

Staff User ID Date I		nid 1	Fotal Amt Paid:	YMCA	\ Member	Commu	ınity Me	mber		
Parent or Guardian Name (Last, First, MI):					Our programs will not run 100% without YOU! Please consider volunteering. Will you:					
Street Address:					Help Coach Help Assist					
City: State :			Zip:							
Email Address:				Phone: Home:() Cell: ()						
Participant Name (Last, First, MI):			Birth Date	Gender M F	School		Grade			
Program			Player/Coach/I r Request:	Player/Coach/Instructo r Request:		Pgm Code		Fee \$		
Program			Player/Coach/Instructo r Request:		Session	Pgm Code		Fee \$		
Participant Name (Last, First, MI):			Birth Date	Gender M F	School		Grade			
Program			Player/Coach/Instructo r Request:		Session	Pgm Code		Fee \$		
Program			Player/Coach/I r Request:	Player/Coach/Instructo r Request:		Pgm Code		Fee \$		
Participant Name (Last, First, MI):			Birth Date	Gender M F	School		Grade			

Program	Player/Coach/Instructo r Request:	Session	Pgm Code	Fee \$
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Rev 01/2022

Waiver of Liability & Promotion

Participant Agreement (Please read, sign & date the following):

I/we verify that the information provided on this application is accurate. This includes, but is not limited to, the selection of membership category and covered individuals. I/we further agree to adhere to the rules of the YMCA of the Iowa Mississippi Valley. If these rules are not followed, I/we agree that the YMCA of the Iowa Mississippi Valley reserves the right to take necessary disciplinary action, including temporary or permanent suspension of membership and total ban from admittance to use the facility. We(I) give our (my) consent to be photographed, videotaped and/or filmed while participating in any YMCA activity and for the resulting photos, etc. to be used by the YMCA for educational and promotional purposes.

I understand that the YMCA of the Iowa Mississippi Valley assumes no responsibility for injuries or illnesses which I may sustain as a result of my physical condition or resulting from my participation in any athletic activities, sports programs, the use of any equipment, exercise, or other activities. I expressly acknowledge on behalf of myself and my heirs that I assume the risk for any and all injuries and illnesses, which may result from my participation in these activities. I hereby release and discharge the YMCA of the Iowa Mississippi Valley, its agents, servants, and employees from any and all claims for injury, illness, death, loss or damage which I may suffer as a result of my participation in these activities. I/we agree that the YMCA of the Iowa Mississippi Valley shall not be responsible for any personal injuries or losses sustained by me/us while on any YMCA premises, or as a result of any YMCA-sponsored event. I understand that the YMCA of the Iowa Mississippi Valley is not responsible for personal property lost or stolen while member and/or program participants are using YMCA facilities or on YMCA premises. I/we further agree to indemnify and hold harmless the YMCA of the Iowa Mississippi Valley from any claims or demands arising out of any such claims or losses. This membership is not a contribution to the YMCA of the Iowa Mississippi Valley and is not tax deductible.

By participating in the YMCA Nationwide Membership Program, I agree to release the National Council of Young Men's Christian Associations of the United States of America, and its independent and autonomous member associations in the United States and Puerto Rico, from claims of negligence for bodily injury or death in connection with the use of YMCA facilities, and from any liability for other claims, including loss of property, to the fullest extent of the law.

The YMCA conducts regular sex offender screenings on all members, participants, and guests. If a sex offender match occurs, the YMCA reserves the right to cancel membership, end program participation, and remove visitation access.

LEGAL AUTHORIZATION OF REGISTRATION INFORMATION & WAIVER OF LIABILITY AND PROMOTION

Signature of Program Participant (if under 18, parent/legal guardian's signature) Date

- Classes do not meet on holidays. Classes missed due to holidays, bad weather, or acts of God are not made up.
- You must be a member of the YMCA through the entire program session if paying the member program fee.
- Classes lacking sufficient students will be cancelled and fees credited or refunded in full. Credits expire after one year.
- All class fees must be paid in full at the time of registration and payment must

accompany the registration form to be valid.

• Members are encouraged to register for classes as far in advance as possible.

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