



YCSD Summer Open Gym & Volleyball League

2018-2019 Registration Form



WE'RE GEARING UP FOR ANOTHER BANNER YEAR OF SPORTS IN THE YONGSTOWN CITY SCHOOL DISTRICT!!! THIS SUMMER WE ARE OPENING OUR GYMNASIUMS FOR OPEN GYM AND ATHLETICS!

Student Name: _____

Date of Birth: _____

Address: _____

City/State/Zip: _____

School: _____

Grade: _____ Gender: _____

Parent/Guardian:

Name: _____

Address: _____

City/State/Zip: _____

Phone(s): _____

Email Address: _____

Emergency Contact (Name/Phone): _____

Medical Health Diagnosis (If Applicable):

Allergies: _____

Medications: _____



Informed Consent:

Having been informed of the YCSD After School Sports Program, I the parent and/or guardian of the above-named applicant, agree to all the activities associated with the program which provides supervised sports instruction and games for children in **grades 3-8**. I assume all risks and hazards incidental to the conduct of such activities and I do further absolve, release indemnify, and hold harmless the above organizations and their affiliates from any claims against their supervisors, agents, employers volunteers, or anyone associated with those hereto mentioned from liability for injury or damage, up to and including death, that the above named child may suffer as a result of his or her participation in any and all activities associated with the above named program. I agree to furnish a copy of my child's birth certificate upon request by league officials and to return on request, any and all uniforms or equipment issued to the above-mentioned player in as good condition as when received, except for normal wear and tear in league activities. I further hereby grant permission to YCSD Sports Program and its affiliates to use name, photograph and/or likeness of the player above for publicity, promotional, and/or internet purposes.

Parent/Guardian Print: _____

Parent/Guardian Signature: _____

Date: _____

For more information call Ms Kat @ 330-356-7286

Youngstown Board of Education
20 W. Wood St. Youngstown, OH 44503
(330) 744-6900 Ext. 6955
rick.shepas@youngstown.k12.oh.us
nick.sferra@youngstown.k12.oh.us