



“Sensational” Cessation

At your Wabash County YMCA.



Name: _____ E-Mail: _____

Address: _____ City _____ Zip _____

Home Phone _____ Cell:Phone: _____

Employer _____

Emergency Contact:

Name: _____ Relationship to Registrant: _____

Phone _____ Cell Phone: _____

Doctor’s Name: _____ Phone: _____

Allergies _____

Medication _____

This waiver of liability must be signed for registration to be valid. There is no insurance provided. As an applicant, I hereby certify that I am in normal health & capable of safe participation in the YMCA Soccer Program and release its representatives from any suit, injury claim or demand which might result from participation in the program. I hereby authorize the Wabash County YMCA, Inc. to obtain medical treatment for me in the event that I am injured. The YMCA has my permission to use photographs and/or videos of me in YMCA promotional material. This waiver of liability & indemnify agreement is an express condition of participation in the program and is freely and knowingly executed.

YMCA NON-MEMBER PROGRAM PARTICIPATION POLICY

All non members who are entering the building to be spectators during a sports program must have a program day pass form on file with the YMCA front desk. Non-members are expected to enter and stay in the area where the program is being held. Any non-member or sibling of a non-member who wishes to enter the teen room or participate in unrelated activities inside the building, such as using either gym or swimming, must return to the front desk and purchase a Day Pass.

Any mistreatment of YMCA equipment or disruption of an event/activity or the act of not being in the designated area makes that person subject to expulsion from the designated area and/or returned to the parent involved with no further privileges during that activity that day. Repeated abuse of policy could result in being taken off of the non-member participant’s pass list.

Signature _____ Date _____