

## FOR YOUTH DEVELOPMENT

FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

## Altru Family YMCA Boys Youth Basketball League 2017 The YMCA in collaboration with the Grand Forks Fastbreak Club is now taking registrations for Boys Youth Basketball for Boys grades 2-6.

As in all YMCA sports, participation and sportsmanship are stressed and no league standings are kept. Teams are made up of approximately ten players from the same school, smaller schools may be combined, or larger may be split up into more than one team. We reserve the right to change rosters to maintain competitive balance. Games and practices will be on Tuesday and Thursday nights between 5:30 and 9:00pm and on Saturdays for one hour. A schedule will be available at the first practice. YMCA reversible shirts are required for this league. Scholarships are available for those with financial need. Contact Darryl at the YMCA 775-2586 ext 209.

## First Practice/Clinic

First practice is January 14<sup>th</sup> at Kelly. Grades 2-3 from 9:30-10:30 and Grades 4-6 from 10:45-11:45. The first practice will be set up and run by YMCA supervisors.

## **Volunteers Needed!**

Volunteer coaches are needed for each team. Parents and relatives are encouraged to get involved. Even if you have limited knowledge, you can help. Materials and training will be available. Please fill in information on registration form below if you can help.

Within the limits of available funding, the Altru Family YMCA will not refuse membership or program services to any person because of a proven inability to pay the cost of participation. Please inquire about Scholarship funding through the United Way, YMCA Partner of Youth and Ulland Grant. **YBL Registration Form Winter 2017** Season: Jan 14-March 9 Deadline: Jan 9 Fees: Member \$80 Non-member \$95 (Waiting List after January 9th. Late registrations will be placed on a team if there is a spot available.) Y reversible shirts are required for all leagues and available at the YMCA \_\_\_\_\_\_ School:\_\_\_\_\_ (attending or will be attending) Name: Address: Birth Date:\_\_\_\_\_ Grade:\_\_\_ Phone: I am willing to volunteer in this program. Fill out below. Name: (Cell/Work) Assistant Coach Coach Phone (H) \_is in normal health and capable of Parent Agreement: I hereby certify that participating safely in the program. I also understand the goals and objectives of this program are not based on winning but rather on fair play, fun, teamwork, skill development, and participation.





Return entry form and fees to: YMCA, Box 13177, Grand Forks, ND 58208-3177 Phone: 775-2586 ext 209

In case of emergency call

