

B.R. Ryall YMCA Youth Basketball League 2010 FALL SEASON

Who: Boys and Girls entering kindergarten through 4th grade.

What: 3 Basketball Leagues based on grade level.

1. K-1: This level is great for the beginner. With lowered baskets (8'), loose refereeing and no score kept the kids are allowed to fall in love with the game while learning the fundamentals of basketball.
2. 2: The basket height (8.5') goes up and the refereeing gets a little stricter as these older kids get a real taste of the game. This league really starts to prepare players for the next level.
3. 3-4: With the basket at 9 ft. and all rules enforced this is the perfect league to prepare players for Junior High ball while still allowing the kids to have fun.

Where: B.R. Ryall YMCA big gym.

When: Registration begins on August 23rd for members and on August 30th for limited members. All K-4 games are on Saturday and will begin on October 16th and end on December 11th, with practices beginning 2 weeks prior. Practice days and times will be determined by our volunteer coaches. Coaches meeting will be on September 30th at 6:30pm. (No games or practices the week of Thanksgiving)

Fee: Member \$60.00
Limited Member \$95.00

Register On-Line
@
brryallymca.org

Come and join us in our most popular league. With three distinct levels based on age this league is fun and productive for all ages. Please remember that this league fills quickly and register early. Questions and comments will be addressed at 858-0100 ext.216.

**B.R. Ryall YMCA 49 Deicke Dr. Glen Ellyn, Illinois 60137
(630) 858-0100 fax: (630) 858-5702 web: brryallymca.org**

**YMCA Mission: To put Christian Principles into practice through programs that build
Healthy Spirit, Mind, and Body for All.**

This organization is not affiliated with this School District. This literature has been made available to students pursuant to the District's neutral policy allowing the distribution of literature from outside organizations. The District does not sponsor or endorse this organization, its activities or viewpoints.

**B.R. Ryall YMCA
Youth Basketball League
2010 FALL SEASON**

Name Birth date Grade (Next Fall)

Address

City State Zip

Name of School

Name of Parent/Guardian

Home Phone Parent's Work Phone

E-mail

Emergency Contact Name (someone other than self) Phone

Shirt Size (must be accurate) (10-12)_____ (14-16)_____ AS_____ AM_____ AL_____ AXL_____

Fee: Member \$60.00
Limited Members \$95.00

Payment Type:

Cash Check #_____ Credit Card

Check # or Credit Card Type Credit Card # Exp. Date

I, hereby, certify that _____ is in normal health and capable of participating in this program. I understand that the goals of this program are based on Fun, Fair Play, Skill Development, Team Work, and Team Equality.

Furthermore, I specifically assume all risks of injury arising out of his or her presence on or about the premises or intended use of equipment or facilities, or participation in the activities of the Y, an Illinois chartered not for profit organization on or about the premises or at another location and does hereby of himself or herself on his or her use or any party they are responsible for, his/hers executors and administrators waive release and agree to indemnify on hold harmless all claims for damages, costs, expense, the B. R.Ryall YMCA, and its respective Officers, Board of Directors, members, employees, volunteers, or agents.

Signed _____ Date _____

I would like to volunteer as a coach _____, or as an assistant coach _____.

Coach Name Phone Work Phone

E-mail