



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

CALLING ALL SUPERHEROES



Superhero Training

Fall Session I 2018: Sept. 10 - Oct. 19

Join us for our ultra popular Superhero Training class. This 45 minute class has junior superheroes jumping over obstacles, swinging through imaginary cityscapes and dodging perilous villain traps! Your superhero will be constantly on the move as they navigate our exciting courses, while learning the character traits that define a hero. Certificates and a small surprise will be awarded to each participant upon training completion.

- WHEN:** Tuesday
11:30 am (co-ed)
- AGES:** 3-5
- PRICE:** \$55/YMCA Members \$70/Community Members
- Location:** Gymnastics Studio



CHASCO FAMILY YMCA SUPERHERO TRAINING

PARTICIPANTS INFORMATION

PARTICIPANTS NAME _____ SEX (M /F) _____ AGE _____ DOB _____ / _____ / _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

PARENT / GUARDIAN NAME _____ HM PHONE _____ ALT PHONE _____

EMAIL _____

EMERGENCY CONTACT & RELATIONSHIP _____ PHONE # _____

MEDICAL CONDITION, ETC. _____

PARENT / GUARDIAN'S ACKNOWLEDGEMENTS

MEDICAL WAIVER: In the event that my child requires emergency medical treatment and I cannot be reached, I hereby authorize the YMCA Staff to make arrangements to transport my child to the nearest hospital / emergency medical facility. I give my consent for any and all necessary medical treatment, if, in fact my child requires the attention of a physician.

WAIVER: I understand that YMCA activities have inherent risks and I hereby assume all risks and hazards incident to my participation in all YMCA activities including transportation to and from said activities. I further waive, release, absolve, indemnify, and agree to hold harmless the YMCA, the organizers, volunteers, supervisors, officers, directors, participants, coaches, referees as well as persons or parents transporting participants to or from such activities from any claims or injury sustained during my use of YMCA facilities or participation in any YMCA activity whether located on YMCA property or not.

PHOTO RELEASE: I give my consent for pictures taken of my child involved in YMCA programs to be used for future YMCA promotions or display.
YES: INT _____

REFUND / TRANSFER POLICY: I understand that the YMCA has no refund policy.

PARENTS / GUARDIAN ACKNOWLEDGEMENT: This is to acknowledge that I have read and agree to the above information. INT _____

*****IN ORDER TO MAINTAIN CHILD/INSTRUCTOR RATIOS WE DO NOT OFFER MAKEUP CLASSES****

PARENT SIGNATURE _____ DATE _____

Y STAFF ONLY

Program Code: (18G) Staff Initials: _____ Amount Paid: \$ _____