



FLAG FOOTBALL

Kindergarten– 5th Grade

September 14th–October 21th



Kindergarten & 1st Grade Registration Fee

YMCA Member	\$40.00
Non-Member	\$55.00

2nd–5th Grade Registration Fee

YMCA Member	\$48.00
Non-Member	\$65.00

Youth Sports Jerseys \$10.00
(Used for all Youth Sports Programs)

Coaches Meeting

Wednesday, September 9th at 5:30pm
(Zoom Meeting)

Fall Football Begins

Monday, September 14

Kindergarten & 1st Grade

Mondays 4:45–5:30 pm

2nd Grade

Mondays & Wednesdays 5:45–6:45 pm

3rd Grade

Mondays & Wednesdays 5:45–6:45 pm

4th/5th Grade

Mondays & Wednesdays 5:45–6:45 pm

PROGRAM NOTE: Teams are limited to 9 players
and each session is limited to 36 participants.

Kandiyohi County Area Family YMCA
1000 Lakeland Drive SE
P.O. Box 757– Willmar, MN 56201
320-222-9622 www.kandiyomca.org
Questions Contact- mats@kandiyomca.org



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

**KANDIYOHI COUNTY AREA FAMILY YMCA
YOUTH PROGRAM REGISTRATION**

2020 FALL YOUTH FLAG FOOTBALL

1 PARTICIPANT INFORMATION YMCA Member Non-member

First _____ Last _____ Gender _____

DOB _____ Age _____ Grade _____ School _____

Street Address _____ City _____ State _____ Zip _____

Emergency Contact Name _____ Phone _____ Relationship _____

2 PARENT INFORMATION

Full Name _____ DOB _____ Mailing address same as participant

Email _____ Primary Cell _____

Full Name _____ DOB _____ Mailing address same as participant

Email _____ Primary Cell _____

Alternative Mailing Address _____

City _____ State _____ Zip _____

3 VOLUNTEER ASSISTANCE Head Coach Assistant Coach Referee

Full Name _____ DOB _____ Shirt Size _____

Email _____ Primary Cell _____

I previously filled out a background check for Youth Sports Yes NO

If NO, I completed a background check today Yes NO

4 SPONSORSHIP/DONATION

I would like to sponsor a YMCA program. Contact me at: _____

I want to help a deserving child participate in a YMCA program:

\$25 \$50 \$75 \$100 Other Amount _____

5 PAYMENT INFORMATION

I have attached a check or cash for the selected session.

I would like to have the registration fee auto-debited from my YMCA membership account.

Signature _____ Date _____ Staff Initials _____

By signing, I authorize the YMCA to use pictures of my Child for Promotional Purposes.