



YMCA OF GREENWICH
WINTER REGISTRATION 2020
ADAPTIVE PROGRAMS

REV. 1.30.2020

DATE SUBMITTED:

Customer's Name (PARENT): _____ D.O.B (REQUIRED): _____ Gender: _____
 Address: _____ City: _____ State: _____ Zip: _____
 _____ Phone Number: _____ Text? Yes No **If yes, please provide carrier:**
 Email: _____ *Email address MUST match the one used on ACTIVE Member software site
 Participant Name (CHILD): _____ D.O.B (REQUIRED): _____ Gender: _____
 Emergency Contact Name/Number: _____
 Additional Info/Special Considerations: _____

WINTER 2020: January 27 – April 9, 2020 (NO CLASSES: Feb. 10-17)

ADAPTIVE PROGRAMS				
Class Name & Number	Day	Time	Registration Information	
Adaptive Basketball	Sa	11am-1pm	Adaptive Programs are free to Members. The YMCA of Greenwich offers an Adaptive Membership for \$10 per year. *Please see note below regarding registering for Safe & Strong Adaptive Swim Lessons.	
Adaptive Yoga	Th	4:30pm-5:30pm		
Safe & Strong Adaptive Swim Lessons	Sa	11am-11:30am		

* To register for Safe & Strong Adaptive Swim Lessons, please contact Lauren Chiappetta, Swim School Specialist, at swimschool@gwymca.org.

WAIVER: (must be signed for participation)

I understand that the YMCA of Greenwich assumes no responsibility for injuries or illnesses which I may sustain as a result of my physical condition or resulting from my participation in any athletic activities, sports program and the use of any equipment, exercise or other activities. I expressly acknowledge that I assume on behalf of my heirs and myself the risk for any and all injuries and illnesses, which may result from my participation in these activities. I hereby release the YMCA of Greenwich, its officers, directors, members, employees and agents from any and all claims for injury, illness, death, loss or damage which I may suffer as a result of my participation in these activities. In an emergency, I authorize the YMCA of Greenwich to administer first aid by trained staff and to obtain emergency medical treatment for any person listed on this application. I accept responsibility for all fees incurred in the care and transportation. I understand that the YMCA of Greenwich is not responsible for personal property lost or stolen while members and/or program participants are using YMCA facilities or on YMCA premises. I give my permission to the YMCA of Greenwich to use, without limitation or obligation, photographs, film footage or tape recordings that may include my image or voice for promoting or interpreting YMCA programs. I acknowledge the Waiver and accept the conditions set forth above and in the Program Brochure and being in sympathy with the goals and purposes of the YMCA, hereby register for program participation.
 I/We agree to abide by all rules and policies established by the YMCA of Greenwich.

Parent Signature: _____ Date: _____

TOTAL REGISTRATION FEE \$ _____

METHOD OF PAYMENT

- Check
- Visa
- Mastercard
- Amex

Credit Card No. _____ Exp. Date _____ CVV Number _____

WE'D LOVE TO HEAR FROM YOU!

How did you hear about this program?

Saw a flier at the YMCA Saw a flier in the community Returning Member An Ad Social Media Other
 A Friend Recommended Me (WHO? _____)

Are there any classes your child would love that we currently aren't offering?

BECAUSE YOU'RE OUR REASON Y.