



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# DEVELOP, GROW, PLAY!

## Tots Summer Variety Sports

### HARRISON FAMILY YMCA

Tots Play Program is a sports instructional program that is created specifically for all ages 2-4 years old. Each weekly lesson is designed with age appropriate skill level and developmental growth. The curriculum will also include many unique and fun activities to capture their attention and develop their love and excitement for various sports and activities. It also fosters a routine centered around an active lifestyle, which will help them develop that lifestyle for the future.

**June 11<sup>th</sup> - July 17<sup>th</sup>**

**Tuesdays 5:30 - 6:30 p.m. or**

**Wednesdays 9:30 - 10:30 a.m.**

\$35/YMCA Members

\$45/Community Members

In the YMCA Family Gym  
or outside if weather permits



# REGISTER HERE!

Child 1 First and Last Name \_\_\_\_\_ D/O/B \_\_\_\_\_

Child 2 First and Last Name \_\_\_\_\_ D/O/B \_\_\_\_\_

Child 3 First and Last Name \_\_\_\_\_ D/O/B \_\_\_\_\_

Child 4 First and Last Name \_\_\_\_\_ D/O/B \_\_\_\_\_

Parent/Contact Person \_\_\_\_\_

Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

**Please check which day you wish to register for.**

**Please circle your shirt size.**

Tuesdays 5:30 - 6:30 p.m.

Toddler Shirt Size: 2T 3T 4T 5T

Youth Shirt Size: XS S

Wednesdays 9:30 - 10:30 a.m.

WAIVER OF LIABILITY: I understand and agree that the Rocky Mount Family YMCA, Inc. (d/b/a Harrison Family YMCA) nor co-sponsoring organizations or their respective chapters, officers, directors, employees, agents, members or volunteers shall assume or have any responsibility or liability for expenses or medical treatment or form compensation for any injury may suffer during or resulting from my participation in this program. I do hereby, for myself, my heirs, executors and administrators, waive, release and forever discharge any and all rights and claims for damages that I may have or that may hereafter accrue to me arising out of or in any way connected with my participation in this program. I also represent and warrant that I have been advised to seek consultation from my doctor about whether I can safely participate in this program and whether there are precautions or limitations to my participation. I also grant permission to the Y to use any photographs or videography that are obtained as part of this program for future Y advertising and promotions.

**Participant's/Parent's Signature (parent signature required if age 17 or under)**

\_\_\_\_\_

Date \_\_\_\_\_