

# Summer Indoor Sports Leagues 2025 THOUSAND OAKS FAMILY YMCA

League age cut-off: Sept. 1, 2024

#### **Important Dates**

First Practice/Game: June 14

Last Game: Aug. 2

- There will be 7 games total
- Age divisions may be combined due to low participation and with other YMCA's for games.
- Travel may be required
- Home games will be played at the THOUSAND OAKS FAMILY YMCA
- No games/practices week of July 5

### All practices/games are held on Saturdays

#### Basketball (co-ed)

🗆 9 – 10 yrs

□ 11 – 12 yrs

🗆 5 – 6 yrs

□ 7 – 8 yrs

General Reg.	Late Reg.	Last Call Period	Amount Paid	
April 7 – May 5	May 6 – 19	May 20 – June 6		
Basketball				
\$140	\$160	ONLINE ONLY Spots are limited to availability. No requests. \$180	\$	
Y Mei	\$			
Donate	\$			
	\$			

Financial Assistance is available through our Open Doors Scholarship Program.

Add-on Activities		
Youth Speed & Strength Training 1x Week	Soccer Strength & Conditioning	Would like more info □
Led by certified Personal Trainers (Sport Specific)		

GIVE. GROW. INSPIRE.

It takes a big heart to help shape little minds. Parents like you make up the majority of our Volunteer Coaches – consider volunteering to be a Youth Sports Coach, email stoneoaksports@ymcasatx.org to get started today or scan the QR code!



#### REQUESTS

**General Reg.** – All Coach and Player requests must be turned in by **May 5, 2025. Requests are not guaranteed. Late Reg.** – Coaches and player **requests will be taken but are not guaranteed. Last Call Period** – Online only, subject to availability. No request will be taken.

Coach Request \_\_\_\_

Teammate Request



## YOUTH SPORTS PROGRAM FEES

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My child is a : Returning P	Player/New Player	Player DOB:	/	/	Age on 9/1/24:						
Player Last Name:		First	Name:			_ Gender:					
Mailing Address:		(	City:		Zip:						
Home #:											
What school does the player attend?:											
Has this participant participated in YMCA sports before? <b>YES or NO</b> If so, when was the last season they played (Please circle one): <b>Spring Summer Fall Winter</b>											
<b>Experience Level</b> Please circle the players current experience level: Never Played 0-2 years 2+ years											
Parent/Guardian:			DOB:		Cell #:						
Email:		Empl	oyer:								
Work #:											
□ I would like to volunt	eer as a Head Coa	ich.									
I would like to volunteer as an Assistant Coach.											
How did you hear about us?											
□ Friend □ E-mail □ Direct Mailer □ Flyer □ Social Media □ Other:											
Program info will be shared through emails from Y Staff and the PlayerSpace platform.     I acknowledge that the email provided below is correct.     email:											
email:											

## WAIVER

I will be responsible for my child's medical costs due to accident or illness. I will hold the YMCA of Greater San Antonio and its directors, officers, employees, volunteers and other agents harmless for incidents which may arise from participation in the YMCA programs and activities, realizing that there are risks in these activities. I give permission for photographs to be made of my child(ren) to be used solely for publicity and training purposes by the YMCA of Greater San Antonio. The YMCA has my permission to evaluate the impact of their programs on my children. I understand that surveys may be conducted on a routine basis and that all information collected on individual children will be confidential. Group averages will be shared with staff to improve programs, with donors to maintain funding and with parents/volunteers to provide information on how the YMCA is building strong kids, strong families and strong communities. I understand all refund/credit requests must be made in writing and will only be considered before the first game. There will be a \$20 processing fee on all refunds/credits. Once practice begins only 50% refund will be given if available. Once games begin no refunds are given. Any credits not utilized within 1 year of issuance will be forfeited.