



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Y Elite Training Program

This program is designed specifically for athletes who are looking to improve their overall athletic ability. The program gives them the training needed to reach their athletic peak. It will focus on improving strength, speed, agility, endurance, and more.

The program will be instructed by former collegiate coaches & collegiate All-American athletes. The main instruction of the program will be given by the following coaches:

Quinn Barfield

- Former US Marine 2000 - 2008
- JUCO All- American basketball 2004
- 15 Years training experience
- ISSA Training, Nutrition, and Group Fitness certified
- Former Arena football player.

Stacy Duffell

- 15 years of NCAA, Division 2 collegiate coaching
- Coached over 30 collegiate athletes to All-Conference or All- American honors
- Dual sport athlete at the collegiate level (basketball and softball) with All Conference honors
- Director of the Heart of Texas basketball camp for 12 years
- YMCA Sports Director

Assistant Instructor

Dalen Brooks

- ACE Certified Personal Trainer
- Certified Nutritionist
- Pre Bros Meal Prep, Owner & Operator

****SPACES ARE LIMITED****

Registration: Now through June 15th

Session 1: June 6th - 24th

Session 2: July 11th - 29th

Jr Division (8 - 10 years)

Tuesdays & Thursdays

8:00 am - 9:30 am

Elite Division (11 - 18 years)

Monday, Wednesday & Friday

Speed & Agility/Strength

8:00 am - 10:00 am

Cost per session

\$60.00 Members / \$75.00 Non Members

Camp will meet at the Y Turf!

Camp begins the week of June 6th. Participants may participate in more than one session. Safety modifications will be made to enforce social distancing. The Y will not provide water.

You can register online or in person at the Y.

Y Elite Program 2022 Registration Form

Participant Name: _____ DOB: _____

Age: _____ Grade: _____ Gender: M or F School: _____

Mailing Address: _____ City: _____ State: _____ Zip Code: _____

Primary Contact Name: _____

Cell Phone Number: _____ Cell Phone Carrier: _____

Primary Contact Email: _____

****Communication done through email to the primary contact, please write legibly.****

Emergency Contact Name: _____

Cell Phone Number: _____ Relationship: _____

T-Shirt Size: _____

Program Information (Please select all that apply)

Session: _____ Session 1: June _____ Session 2: July

11 - 18 years | Elite _____

8 - 10 years | Junior Elite: Morning _____

YMCA MISSION: The mission of the San Angelo YMCA is to serve the people on the community of all faiths and ages, with emphasis on families and youth, to permit them to achieve their God-given potential in mind, body, and spirit, through its programs, staff, facilities and the community.

WAIVER: I hereby, for myself and my agents, waive and release any and all rights and claims which may accrue against the YMCA of San Angelo, and its respective officers, agent, sponsors, or any employees for any injury which may be suffered in connection with my child's participation in the program. I hereby acknowledge that the program provides no insurance coverage and my own insurance will be used in the case of an accident. By signing below, I am also giving permission for my child's picture or likeness to be used for promotional purposes of the YMCA Sports Department.

PHOTO RELEASE: Additionally, in consideration of being allowed to participate in YMCA membership and programs, I understand that images, video, and film footage are often used by the YMCA of San Angelo for promotional purposes. For my participation in activities to be conducted by the YMCA of San Angelo hereby give my permission and consent, now and for all time, to the YMCA of San Angelo, The National Council of Young Men's Christian Associations of the United States of America (YMCA of the USA) and third parties collaborating with YMCA of San Angelo to make, reproduce, edit, broadcast or rebroadcast any video film, footage, soundtrack recordings and photo reproductions of me/and or my narrative account of my experience at YMCA of San Angelo for publication, display, or exhibition thereof in promotions, advertising, and legitimate business uses without any compensation to, and/or claim, by me. I may, or may not be, identified in such reproductions; however, I shall not be stated by name to have endorsed any particular commercial products or commercial services.

REFUNDS: Full refunds will be issued only upon cancellation of the program. Should a refund be requested prior to the first meeting, a \$10.00 fee will be assessed.

Parent's Signature : _____ **Date:** _____

Parent's Name Printed: _____