



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# DON'T JUST DREAM IT, GO GET IT

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:

## Y ELITE TRAINING PROGRAM

### Quinn Barfield-LEAD TRAINER

- 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.

### Registration: March 15 - June 15

Session 1: June 3 - 28, 2024

Session 2: July 1 - 26, 2024

### Jr Division (8 - 10 years)

Tuesdays & Thursdays  
Speed & Agility  
8:00 am - 9:30 am

### Cost per session

\$50.00 Members | \$65.00 Non-Members

### 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 begins the week of June 3. Participants may participate in more than one session. The Y will not provide water.

YOU CAN REGISTER ONLINE OR IN PERSON AT THE Y.

**\*\*SPACE IS LIMITED\*\***





## Y Elite Program 2024 Registration Form

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### Participant Information:

First and Last Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Gender: F or M School: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Approximate Weight: \_\_\_\_\_  
Additional Information we may need to know (conditions, allergies, injuries): \_\_\_\_\_

### Primary Contact Information:

First and Last Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Cell Phone Number: \_\_\_\_\_ Cell Phone Carrier: \_\_\_\_\_  
Primary Contact Email: \_\_\_\_\_

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

### Emergency Contact:

First and Last Name: \_\_\_\_\_  
Cell Phone Number: \_\_\_\_\_ Relationship: \_\_\_\_\_

T-Shirt Size:    YS    YM    YL    AS    AM    AL    AXL  
(circle one)

### Program Information ( Please select all that apply)

Session:    Session 1: June \_\_\_\_\_    Session 2: July \_\_\_\_\_  
8 - 10 years | Junior Elite | 8:00 am - 9:30 am | TR \_\_\_\_\_  
11 - 18 years | Elite | 8:00 am - 10:00 am | MWF \_\_\_\_\_

**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 or any communicable illness such as COVID-19 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 enrolling/registering my child in the program, myself and my agents understand and agree to follow all policies outlined in the Parent & Participant Handbook. (Can be found online at [www.ymcasanangelo.org](http://www.ymcasanangelo.org)) I understand that I will automatically receive marketing communications from all outlets. If I decide to stop receiving these communications, I can choose to unregister at any time.

**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:** \_\_\_\_\_