



YMCA of Pierce and Kitsap Counties
Gig Harbor YMCA – Late Nite Participant Info Form
Late Nite Participant Registration 2010-2011

**FOR YOUTH DEVELOPMENT
 FOR HEALTHY LIVING
 FOR SOCIAL RESPONSIBILITY**

Please Print – Please Complete Both Sides

First Name: _____ Last Name: _____ Nickname: _____

Birthday: ____/____/____ Age: _____ Sex: M F Ethnicity: _____

Address: _____ City: _____ State: _____

ZIP Code: _____ School attending this year: _____ Grade: _____

Home Phone : _____ Cell Phone # : _____

Emergency Contact: _____ Relationship to you: _____

Emer. Cont. Phone: _____ Alt. Phone: _____

MySpace Facebook Twitter Other: _____

Email (optional): _____ URL: _____

Late Nite Participant Guidelines

1. Late Nite is open to members and non-members from 14-20 years of age.
2. Doors open on Friday nights at 9:30 p.m. and participants may arrive until 10:30 p.m.
NO ADMITTANCE AFTER 10:30 p.m. You may call the YMCA for a late entry until 10:30 p.m. of that night. There will be no re-entry to the program.
Gig Harbor YMCA Number 253-853-9622
3. Appropriate athletic apparel must be worn at all times for the activities you plan to participate in. Exceptions are made for dance activities only.
4. First time participants must have this form completed for admittance into Late Nite. Returning participants must check in with a YMCA card or have their name entered into the system. Participants must show picture ID (Student ID or State issued ID) if their photo is not in the system.
5. All activities will end 15 min. before closing time. Participants are encouraged to help clean up.
6. Please request a locker at the Welcome Center for personal items. Leave all valuables at home. The YMCA and Late Nite staff is not responsible for lost or stolen items, checked in or not.
7. All facility rules must be followed in addition to the Late Nite rules: Be Safe, Be Respectful and Do the Right Thing. Respect the Staff, Respect One Another, Respect the Building & Equipment.
8. Violation of rules will result in suspension from all YMCA Late Nite programs.

I understand and agree to abide but the conditions listed above. Date: ____/____/____

Participant Signature: _____ Printed Name: _____

YMCA CORE VALUES

HONESTY – RESPECT – CARING – RESPONSIBILITY

"Your interest should be in your future...You're going to be spending the rest of your life there."

**** PLEASE COMPLETE BOTH SIDES ****

YMCA OF PIERCE and KITSAP COUNTIES
CHILD RELEASE and WAIVER of LIABILITY and INDEMNITY AGREEMENT

IN CONSIDERATION of being permitted to utilize the facilities, services and programs of the YMCA of Pierce and Kitsap Counties (YMCA) or for my child to so participate, for any purpose, including, but not limited to observation or use of facilities or equipment, or participation in any off-site program affiliated with the YMCA, the undersigned, for himself or herself and such participating child and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will, inspect and carefully consider such premises and facilities or the affiliated program.

It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such premises and all facilities and equipment thereon and such affiliated program have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use or participation by the undersigned and such children.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE INCLUDING, BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY OFF-SITE PROGRAM AFFILIATED WITH THE YMCA, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED ON HIS OR HER BEHALF AND BEHALF OF SUCH CHILD, HEREBY RELEASES, WAIVES, DISCHARGES AND CONVENANTS NOT TO SUE the YMCA and all branches thereof, its directors, officers, employees, and agents (hereinafter referred to as "releasees") from all liability to the undersigned or such child and all his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned or such child whether caused by the ordinary negligence of the releasees or otherwise while the undersigned or such child is in, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with the YMCA.
2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any, loss, liability, damage or cost they may, incur due to the presence of the undersigned or such child in, upon or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA whether caused by the ordinary negligence of the releasees or otherwise.
3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE to the undersigned or such child due to ordinary negligence of releasees or otherwise while in, about or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA.

THE UNDERSIGNED further expressly agrees that the foregoing RELEASE WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of Washington and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements or inducement apart from the foregoing written agreement have been made.

I HAVE READ AND UNDERSTAND THIS DOCUMENT AND RELEASE Date: _____

Signature of Parent: _____
Mother/Legal Guardian of Child

Signature of Parent: _____
Father/Legal Guardian of Child

Name of Child in Late Nite Program(please print):_____

*** * * PLEASE COMPLETE BOTH SIDES * * ***