



Adams County  
Youth League

# Summer Ball



Season  
starts  
May 15th

Tournament  
starts  
June 21st

\$50 if register by March 19th  
\$65 if registered after March 19th

Minor Division

Major Division

Junior Division

Fall 2024  
1st, 2nd & 3rd Grade

Fall 2024  
4th & 5th Grade

Fall 2024  
6th, 7th & 8th Grade

Registration forms and payment can be returned to Western Elementary Office, Western Junior High Office or the address listed below along with cash or check payable to "Western YMCA".

Western Community Center YMCA  
217-335-3030

[westernymca.net](http://westernymca.net)

1400 Mortimer Street Barry IL 62312  
[christinap@quincymca.net](mailto:christinap@quincymca.net)

# Summer Ball Registration Form



Athlete Name:	Birthdate:	
Athlete will participate in/ circle one:  <div style="display: flex; justify-content: space-around; width: 100%;"> <span>Baseball</span> <span>Softball</span> </div>	Grade in Fall 2024:	
Parent Name:	Cell Number:	
Email:		
Mailing Address:		
Athletes Jersey Number 1st Choice      2nd Choice      3rd Choice	T-shirt size/Circle one Youth* YS    YM    YL	Adult* AS    AM    AL    AXL

Special Request \_\_\_\_\_  
 \_\_\_\_\_

We will make our best effort to honor any special request made in writing with the submission of this document. Special request are not guaranteed.

**Youth sports couldn't happen without the support of volunteers. Please consider helping if you are able.**

I am able to help with (circle any that apply) :

Head Coach   
  Assistant Coach   
  Field Prep   
  Score Book   
  Concession Helper

Volunteers name: \_\_\_\_\_ Cell Number: \_\_\_\_\_  
 Volunteers Email address: \_\_\_\_\_ Volunteers Shirt Size: \_\_\_\_\_

I, the undersigned parent or legal guardian of the above named minor, do hereby give my consent and agree that he/she may participate in Western YMCA programs. I understand that the YMCA, its staff, volunteers, Board of Directors or anyone designated by the YMCA to work with the participants assumes no responsibility for anyone in case of any loss by accidents or injury to persons or property as a result of any child using YMCA property or participating in a YMCA program and I hold same harmless for any such occurrence. I further understand that the YMCA does not carry any medical or accident insurance for injury or loss for persons using the YMCA facilities involved in YMCA programs, and I am responsible for adequate medical insurance and insurance for loss of theft of property. My understanding of these matters is witnessed by my signature below. I also grant full permission to the YMCA to use, without limitation, photographs, film footage or tape recordings which may include the applicant(s) image or voice for purposes of promoting or interpreting YMCA programs. ONLY 50% of your program service fee is refundable. These refunds can only be given before the 1st game. NO refunds will be issued after the 1st game.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_