



# Westside YMCA

WestsideYMCA is proud to present **Skyhawks...**

## Summer Sports Camps!

Teaching life skills through sports since 1979



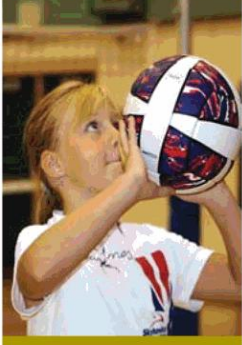
**RESPONSIBILITY**



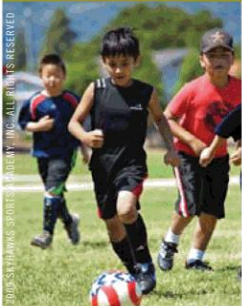
**RESPECT**



**LEADERSHIP**



**SPORTSMANSHIP**



**TEAMWORK**

### Soccer

- |   |           |           |                  |           |       |
|---|-----------|-----------|------------------|-----------|-------|
| SSA32848                                      | 8/1 - 8/5 | Days: M-F | 9:00am - 12:00pm | ages 5-7  | \$99  |
| Location: Bonny Slope Park, 11100 NW Thompson |           |           |                  |           |       |
| SSA28359                                      | 8/1 - 8/5 | Days: M-F | 9:00am - 3:00pm  | ages 7-12 | \$129 |
| Location: Bonny Slope Park, 11100 NW Thompson |           |           |                  |           |       |

### Tiny-Hawk Soccer

- |   |           |            |                 |          |      |
|---|-----------|------------|-----------------|----------|------|
| SSA32849                                      | 8/1 - 8/4 | Days: M-Th | 1:00pm - 1:45pm | ages 3-4 | \$30 |
| Location: Bonny Slope Park, 11100 NW Thompson |           |            |                 |          |      |

### Basketball

- |  |             |           |                  |          |      |
|--|-------------|-----------|------------------|----------|------|
| SSA32847   | 6/27 - 7/1  | Days: M-F | 9:00am - 12:00pm | ages 5-7 | \$99 |
| Location: Beaverton Hoop YMCA, 9685 SW Harvest Court |             |           |                  |          |      |
| SSA24877   | 7/18 - 7/22 | Days: M-F | 9:00am - 12:00pm | ages 5-7 | \$99 |
| Location: Beaverton Hoop YMCA, 9685 SW Harvest Court |             |           |                  |          |      |
| SSA28363   | 8/15 - 8/19 | Days: M-F | 9:00am - 12:00pm | ages 5-7 | \$99 |
| Location: Beaverton Hoop YMCA, 9685 SW Harvest Court |             |           |                  |          |      |

### Flag Football

- |   |             |           |                 |           |       |
|---|-------------|-----------|-----------------|-----------|-------|
| SSA28360  | 7/18 - 7/22 | Days: M-F | 9:00am - 3:00pm | ages 7-12 | \$129 |
| Location: Cedar Park Middle School, 11100 SW Park Way       |             |           |                 |           |       |
| SSA28361  | 7/25 - 7/29 | Days: M-F | 9:00am - 3:00pm | ages 7-12 | \$129 |
| Location: Raleigh Park Elementary School, 3670 SW 78th Ave. |             |           |                 |           |       |

### Tennis

- |  |            |           |                  |           |       |
|--|------------|-----------|------------------|-----------|-------|
| SSA24893   | 6/27 - 7/1 | Days: M-F | 9:00am - 12:00pm | ages 7-12 | \$112 |
| Location: Jurgens Park, SW Jurgens Lane & SW Hazelbrook Rd |            |           |                  |           |       |
| SSA25411   | 8/1 - 8/5  | Days: M-F | 9:00am - 12:00pm | ages 7-12 | \$112 |
| Location: Jurgens Park, SW Jurgens Lane & SW Hazelbrook Rd |            |           |                  |           |       |

### Mini-Hawk (Soccer, Baseball & Basketball)

- |   |             |           |                  |          |      |
|---|-------------|-----------|------------------|----------|------|
| SSA28362  | 7/18 - 7/22 | Days: M-F | 9:00am - 12:00pm | ages 4-6 | \$99 |
| Location: Cedar Park Middle School, 11100 SW Park Way |             |           |                  |          |      |

*The YMCA of Columbia-Willamette does not discriminate on the basis of color, creed, disability, national Origin, race, religion, physical or mental handicap, veterans status, marital status, sex or sexual orientation.*

Partnering to develop active, healthy communities one child at a time.

# Registration Form

## 3 WAYS TO REGISTER



**ONLINE**  
 www.skyhawks.com  
 or  
 www.ymca-westside.org



**MAIL**  
 Skyhawks  
 6311 E. Mt Spokane Park Drive  
 Mead, WA 99021  
*Make checks payable to:  
 Skyhawks*



**FAX**  
 (888) 466-2318  
*\$5 Service fee per child per  
 program will be assessed for faxed  
 registrations.*

**For more information please call Skyhawks: (866) 849-9936.**

**Participant** Last Name \_\_\_\_\_

**Participant** First Name \_\_\_\_\_ Birth Date \_\_\_\_-\_\_\_\_-\_\_\_\_ Age \_\_\_\_ Gender: M / F

**Parent** Last Name \_\_\_\_\_ **Parent** First Name \_\_\_\_\_

Email \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

PLEASE LIST THE PROGRAM(S) YOUR CHILD WILL ATTEND. Photocopy for additional children.

Course #	Sport	Date	Location	Fee
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____



Skyhawks supports two 501 (c) (3) non-profit organizations. Skyhawks Cares provides scholarships for Skyhawks camps and Brandon's Goal is dedicated to finding a cure for pediatric cancer.  
 I would like to donate \$\_\_\_\_\_ to Skyhawks Cares \$\_\_\_\_\_ to Brandon's Goal.



Payment: _____ Check included, or Charge my:    __ Visa    __ M/C	Security Code _____
Card Number _____	Exp. Date ____/____
Signature _____	Name on card _____

**Parents, please read and sign the Medical Consent and Release of Liability below to complete registration.**

I, the undersigned parent/guardian of the individual named above, understand that this activity involves an element of risk and a danger of accidents and injury and knowing those risks I hereby assume those risks. I authorize the program directors and/or instructors as Agents for the undersigned to consent to medical, surgical and/or dental examination, in addition to any and all other treatments that may be deemed necessary by medical personnel. In addition, I understand that by signing this agreement, I hereby knowingly release and discharge Skyhawks and YMCA of Columbia-Willamette from any and all liability resulting from any injury associated with the above named individual's participation in this activity. I agree that pictures taken during program hours may be used for future promotional purposes and that I give my permission to Skyhawks and YMCA of Columbia-Willamette to use any pictures or images of the above named individual without compensation. Skyhawks will not provide health and/or accident insurance for program participants. By signing below, I attest that I have read and fully understand and agree to the assumption of risk, waiver and release of all claims, and the photo policies set forth herein.

Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_