



### FEE:

Family Members — \$80

Youth Members — \$120

Community Members — \$155

\*Prices increase \$10 on January 2nd

By completing this form you are opting into Jr. Celtics e-newsletter. You may unsubscribe at any time using the link included at the bottom of each email.

### CONTACT:

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### Charlestown YMCA

150 3rd Ave, Charlestown, MA 02129



## Jr. Celtics Youth Development League

## WELCOME!

The YMCA of Greater Boston has partnered with the Boston Celtics and their Jr. Celtics Youth Development Leagues! This season participants on instructional and recreational teams will experience an exclusive basketball program teaching the values of Celtics basketball and focusing on healthy player and coach development.

## JR. CELTICS YOUTH DEVELOPMENT LEAGUE (Grades K-5)

This program is for girls and boys in grades 1st to 4th at the Charlestown YMCA. Below are the benefits for the program:

- One reversible branded Celtic and Y jersey, to be provided to each program participant
- Two tickets to one Celtics open practice event to be provided to each program participant
- Access for participants in the Fall Programs to participate in one Jr. Celtics Clinic
- The opportunity for program participants to receive a fifteen percent (15%) discount on the registration fees for Jr. Celtics Youth Basketball Clinics, and Celtics Camps

## Dates to Remember

### October 13 (Saturday) – Afternoon Time TBD

Jr. Celtics Coaches Clinic – Auerbach Center, Brighton  
Site directors and head coaches to attend (Approx. 100)

### January 2nd- Second Session

Wednesday 5:00-6:00pm (grades K-2)

Wednesday 5:00-6:00pm (grades 3-5)



## REGISTRATION:

Please print legibly, this information is critical for registration and ALL league communication.

League:  1st/2nd grade  3rd/4th grade

Child's Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Age: \_\_\_\_\_ Male: \_\_\_\_\_ Female: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: (Print Clearly) \_\_\_\_\_

**\*\*Required—ALL communication is via email.**

Interested in volunteering as coach? \_\_\_\_\_

If so, will you be able to attend the October 13th Coaches Clinic? \_\_\_\_\_

Jersey Size: Youth S \_\_\_\_\_ Youth M \_\_\_\_\_

Youth L \_\_\_\_\_ Youth XL \_\_\_\_\_

## Payment Information

\*Method of Payment: \_\_\_\_\_ Cash \_\_\_\_\_ Check \_\_\_\_\_ Credit Card

\*Credit Card Type: \_\_\_\_\_

\*Credit Card Number: \_\_\_\_\_ Exp Date: \_\_\_\_\_

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

## WAIVER OF LIABILITY

The Charlestown YMCA does not provide insurance for participants in its programs. I, the applicant, agree that the YMCA and all individuals participating in the YMCA Sports League, in any capacity, will not be held liable for any causes or actions, claims and injuries arising out of the participation of the application in the YMCA Sports League. I hereby release all said individuals from injuries and agree that all players participate at their own risk. I, as parent or legal guardian of the applicant, hereby consent to the participation of the applicant in the YMCA Sports League under the above-mentioned conditions.

\_\_\_\_\_  
Applicant/Participant Signature

\_\_\_\_\_  
Date