



2026 YMCA SPRING FLAG FOOTBALL Ages 6-12

Age Divisions will be adjusted based on sign ups

REQUESTS CAN NOT BE GUARANTEED

TEAMS WILL BE DETERMINED BY A DRAFT

Deadline to Register: FEBRUARY 20, 2026

\$15 Late Fee after deadline (if spots are available)

REGISTER ONLINE AT www.hopkinsvilleymca.org

Staff Initials: _____

Date: _____

Amt. pd. _____

Cash _____

Check # _____

Credit _____

Coach: Y N

YMCA Members \$70 + Tax
(\$74.20)

Non-Members \$85 + Tax
(\$90.10)

Payable to YMCA.

AGE GROUPS: Please Circle the appropriate age group. **Age groups can change depending on registration in each age group.**

U9- Flag Football
AGES 6-8 (co-ed)

U13- Flag Football
AGES 9-12 (co-ed)

All players will receive a flag football shirt, flag belt and mouth guard.

GAME DATES:

March-May

Tentatively *Depending on weather conditions (Games will be played on Saturdays and weekdays after 5:00 p.m.)

GAME LOCATIONS:

Hopkinsville Family YMCA and Debow Park on North Drive in Hopkinsville.

Refund Policy- The YMCA does not give refunds for its sports programs!

INITIAL: _____ **Date:** _____

For questions/concerns please email us at:
sports@hopkinsvilleymca.org

The YMCA is a United Way Agency and offers financial assistance. As funds are available

Participant's Name: _____

Participant's School: _____

Birthdate _____ Age: _____

Gender: Male or Female Age as of Sept 1, 2025 _____

Jersey Size: (Circle One) YS YM YL AS AM AL AXL

Address: _____ Zip: _____

City/State: _____

Cell Phone: _____ E-mail Address: _____

Mother: _____ Birthdate: _____ Cell/Work # _____

Father: _____ Birthdate: _____ Cell/Work # _____

Emergency contact person and phone: _____

Special needs or disabilities of applicant: _____

Do you have siblings in the same age group? YES NO

Do you want these siblings to play on the same team? YES NO

Are you willing to Volunteer to Coach? YES NO

Volunteer Coach Information:

Name: _____

Phone Number: _____

E-Mail: _____

(When registrations end coaches will be contacted. Coaches are chosen by date registration received. If you coach you will receive a ½ off system credit on your account to be used towards future programs.)

Waiver

I acknowledge that the Hopkinsville Family YMCA carries liability insurance and does not provide health or accident insurance for its programs. In consideration of my participation in the activities of the YMCA flag football program, I do hereby agree to hold free from any and all liability the Hopkinsville YMCA, Debow Park, and The Hopkinsville Christian County Recreation Department and its respective officers, directors, employees, and volunteers and do hereby for myself, my heirs, executors, and administrators, waive, release and forever discharge all rights and claims for all injuries and damages occurred. I do hereby declare participant to be physically, emotionally sound, having medical approval to participate in the activities of the YMCA flag football program. I have read this registration form and agree to abide by all YMCA guidelines.

Photo Release

I HEREBY CONSENT to the use, publication and display, in whole or in part, by or on behalf of HOPKINSVILLE CHRISTIAN COUNTY FAMILY YMCA and its agents and assignees, including, but not limited to all media sources and HOPKINSVILLE CHRISTIAN COUNTY FAMILY YMCA, of any film, video tapes or photographs in which I or my minor child may be portrayed or identified. I waive all claims for any compensation for such use. I understand that permission is given for a use and that HOPKINSVILLE CHRISTIAN COUNTY FAMILY YMCA will be credited for the photograph(S). I waive all rights to inspect and/or approve any of the printed matter that may be used in conjunction with the photograph(S) and the use to which it/they may be put.

Signature of Parent/Legal Guardian: _____ **Date:** _____

YMCA Mission Statement:

To put Christian principles into practice through programs that build a healthy spirit, mind, and body for all.