



**YORKVILLE YOUTH ATHLETIC ASSOCIATION
AFTER SCHOOL SPORTS PROGRAM 2010-11**

AT

P.S. 183

419 E 66 STREET

(between York and First Avenues)

The Yorkville After School Program is now entering their second year at P.S. 183! Returning will be our director **Hector Mercado**, a fun loving athlete, who is wonderful with children. **Megan Wasilik** will return to work with your children on their homework assignments and make sure that every child is dismissed to the appropriate adult. **Megan and Hector** teach sports during the children's gym time. Megan wears many hats at Yorkville as the office manager and director of many of our programs.

Program Dates: September – January & February – June (two semesters)

Times: 3:00 P.M. – P/U begins at 5:15/ ends at 6:00 P.M. (late fees after 6 p.m.)

Cost: \$500.00 per semester per day, per semester first child

Discount for siblings is \$50.00.

All sports will be covered each semester. There will be skills and drills taught and a game played. Sports included, but not limited to: Basketball, Flag Football, Soccer, kickball, whiffleball, badminton, hockey, lead-up games, tag games and games without winners. Children will spend 45 minutes on homework, 45 minutes in the gym and 45 minutes doing outdoor activities and finally board games and free play in the gym until parent pick up.

Each day we have two separate groups. Programs to Choose from:

Monday: Grade K & 1 (Co-ed) & Grades 2 - 5 (Co-ed)

Wednesday: Grade 2 & 3 (co-ed) Grade 4 & 5 (Co-ed)

Thursday: Grades K & 1 (co-ed) & Grade 2 - 5 (Co-ed)

Friday: Grade K, 1 and 2 (Co-ed) Grades 3, 4 & 5 (Co-ed)

Healthy snack will be provided each day at no additional cost.

Questions please call 212 360-0022 or e-mail Arlene Virga at yyaa14@aol.com

No refunds, transfers or credits at any time. Must Sign Release Statement

For an application visit our website www.yyaa.org

Yorkville Youth Athletic Association
After School Registration
Fall/Winter 2010-2011
September - June

Please use one application per child. Please print clearly.

Name _____ Grade & Classroom _____

School _____ Date of Birth _____

Address _____ Apt # _____ Zip Code _____

Home # _____ Home # 2 _____

Work # _____ Work # 2 _____

Cell # _____ Cell # 2 _____

Email Addresses: _____

Parents Names _____

Parent Signature _____

Sorry NO Refunds, transfers or credits at ANY TIME

Who is permitted to p/u your child _____

Please check as many days as you wish to attend:

September - February _____ and /or February - June _____

_____ Monday: Grade K & 1 (Co-ed) & Grades 2 - 5 (Co-ed)

_____ Wednesday: Grade 2 & 3 (Co-ed) & Grades 4 & 5 (Co-ed)

_____ Thursday: Grade K & 1 (Co-ed) & Grades 2 - 5 (Co-ed)

_____ Friday: Grade K & 1 & 2 (Co-ed) & Grades 3, 4 & 5 (Co-ed)

Fee reminder: \$500.00 per semester, per day. \$450.00 per semester, per day for second child and any additional children (\$50.00 sibling discount)

Make check payable to: Yorkville Youth Athletic Association

NO Refunds, credits, or transfers AT ANY TIME

Total Fee Enclosed _____ Must Sign Release Statement

Mail to: Yorkville Youth Athletic Association,
P.O. Box 1556
New York, N. Y. 10028 - 1556

Our New Insurance Company requires all parents or guardians to sign this release form for each child.

Yorkville Youth Athletic Association
Release Statement
2010-2011

Release Statement: I, the parent/guardian of _____, do hereby give my approval for him/her to participate in any and all activities of the Yorkville Youth Athletic Association and agree to abide by all rules and regulations of the institution. I assume all risks and hazards incidental to such participation in these activities, and I do hereby waive, release, absolve, indemnify, and agree to hold harmless the Yorkville Youth Athletic Association and it's staff, the Board of Directors of The Yorkville Youth Athletic Association, officers and directors, the organizers, sponsors, supervisors, participants and all persons transporting my child/dependent to and from activities, from any claims arising out of an injury to my child/dependent, whether the result of negligence or for any other cause, except to the extent and in the amount covered by accident or liability insurance.

I also understand that the Yorkville Youth Athletic Association has a no refund, no credit policy for any reason at any time for any program.

Signature of Parent/Guardian _____ Date _____