

17/18

YORKVILLE YOUTH ATHLETIC ASSOCIATION

1968 50 2018

Martial Arts – Karate

约克维尔极真会館手道小孩



MONDAYS and/or WEDNESDAYS
September 11, 2017 – November 15, 2017

Skipping 10/9

Students will meet at St. Joseph's of Yorkville Gym
(87th Street between First & York Avenues)

Grades 2-4: 6pm-7pm Grades 5-7: 7:15pm-8:15pm

Yorkville is excited to announce the arrival of Sensei Rivera to the YYAA family. Starting this fall, Sensei Rivera will begin training students in grades 2 through 7 on Monday and Wednesday evenings. In the tradition and teachings of the International Kyokushinkai Karatedo Union, Sensei Rivera stresses training success that is achieved through dedication, discipline, and veracity.

*Note all students will be required to purchase a Gi (uniform)
Info will be sent after registration, cost is approximately \$50 for the Gi.*

Fee: Mondays OR Wednesdays (\$225) Mondays AND Wednesdays (\$375)
Please note: no refunds, transfers or credits at any time.

Circle one or both: MONDAYS WEDNESDAYS

Student's Name _____ Grade _____ School _____

Address _____ Apt # _____ Zip Code _____

Day Telephone _____ Night Telephone _____

Add'l Telephone _____ Email _____

*Send application, waiver, and fee made payable to Yorkville Youth Athletic Association
to: Yorkville Youth Athletic Association • PO Box 1556 • New York, NY 10028*

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Yorkville Youth Athletic Association
Release Statement
2017-2018

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 its staff, the Board of Directors of The Yorkville Youth Athletic Association, officers, directors, organizers, sponsors, supervisors, participants, trainers, independent contractors, agents, representatives, all persons transporting my child/dependent to and from activities, the City of New York, New York City's Department of Parks and Recreation, and their respective officials, from any claims, loss, liability, expense or damage 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 understand that this release applies to both future and present injuries, damages or loss and is binding on the Player and the Players heirs, executors and administrators.

I understand that the Player may be photographed and/or videotaped during participation in YYAA and hereby grant YYAA permission to use the Players likeness in photographs and/or video in any and all of its publications and in any and all other media.

I also understand that the Yorkville Youth Athletic Association has a no refund, no transfer, no credit policy for any reason at any time for any program. Times and locations are subject to change.

Signature of Parent/Guardian _____ Date _____

Please email Arlene at yyaa14@aol.com or call 212 360-0022 with any questions
Visit our website at www.yyaa.org

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to: Yorkville Youth Athletic Association • PO Box 1556 • New York, NY 10028*