



ACYP Youth Recreational Program Registration

Dear Parents,

On May 18th, 2020 Governor Abbott opened youth Sports in Texas. I have attached COVID 19 Protocol according to the State of Texas recreational Sports protocol. Governor Abbott put this protocol out for parents, spectators, staff, volunteers and players to follow in order to stop the spread of the virus. Governor Abbott stated, “We must find reasonably safe ways to restore these services so that our children can be cared for, and for their parents and guardians to be able to return to work. For adults in the workplace or other public spaces, we are confident that if certain measures such as cloth face coverings or non-medical grade masks, respiratory etiquette, frequent hand washing / hand sanitation and environmental cleaning and sanitizing are widely observed, we can then proceed with reopening Texas in a safe and measured way. However, such protective measures that we can expect from adults are, for a variety of reasons, simply not possible for children and youth to practice in sporting activities. All of these factors mean that while certain precautions against the spread of COVID-19 can and will be applied to youth sports, the infection control measures that can be put in place in these settings will differ from those that are suitable for other social, business and commercial settings. Every adult who is responsible for providing care for youth in these settings must be aware of these facts and be willing to comply with the infection control measures that will be in place in these settings. **Parents should monitor the health of their children and not send them to participate in sporting activities if they exhibit any symptom of COVID-19 or if you know of you or your other family members becoming exposed. They should seek COVID-19 testing promptly and if they choose not to, must self-quarantine.** Individuals aged 65 or older are at a higher risk of COVID-19. Parents should protect any vulnerable persons who are members of the same household or come into frequent, close contact with individuals who participate in youth sports.” ACYP will reserve the right to shut down temporarily or permanently any sports programs that might risk the safety of others to protect the organization from liability due to COVID 19. All parents and guardians, registering children, will be required to read & sign acceptance of the State provided protocol we will put in place in order to keep everyone as safe and to be able to run our programs without closure.

Sincerely yours,

Debbie Bolf

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www.acyp.org Follow us on Facebook

Health Protocols from the State of Texas (2020)

1. Practices will allow one parent or guardian per participant, as needed. Once Games begin spectators should maintain at least 6 feet social distancing from individuals not within the spectator's group. The group should consist of immediate family, under 10 in number. Please do not invite high risk family members to the games. **Please note that after games or practices, you or your child could cause an enhanced risk when in direct contact with anyone age 65 or older for 14 days after participating in a sport event or practice.**
2. Bleachers and the Concession Stand line will be marked with distance markers to help you when social distancing. At outside events be aware of social distancing and wear a mask when someone invades your social space.
3. Parents should monitor the health of their children and not send them to participate in sporting activities if they exhibit any symptom of COVID-19. Do not come to practice or games if you or your child have these signs or symptoms: cough, shortness of breath or difficulty breathing, chills, repeated shaking with chills, muscle pain, headache, sore throat, loss of taste or smell, diarrhea, feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit, or you came in close contact with a person who is lab confirmed to have COVID-19. At all inside events, spectators, volunteers, and staff will have face masks on during practices and games, if possible and if not wearing a face mask, must have a social distance of 6ft. Players on the court or on the field will not be required to wear a mask
4. Each sporting team is considered a cohort. Outside of the sporting event, discourage mixing between cohorts. Once games or practices are over, quickly and safely leave the building and return to your cars to depart. Do not hang out talking to other teams coming in or going out of the Center. By following the groups or cohort strategy, contact tracing can be initiated promptly, and isolation and surveillance can be implemented in short order.
5. Another way to use cohort strategy is having games and practice times staggered where players and families have enough time to leave, before other teams arrive.
6. ACYP reserves the right to send any Parent, Spectator, or child home if we suspect you are ill.
7. At the Center there will be no drinking out of the water fountain. Please make sure you provided your child with a water bottle at practice and games. Please have their name written boldly on the bottle so no one accidentally picks up the wrong bottle. Please carry a personal sanitizer.
8. Coaches and staff will be trained in cleaning and disinfecting equipment and play areas.
9. Be prepared to have your temperature checked and to sign an attesting that you have not had any COVID 19 symptoms before entering gym. This does not apply to outside settings.
10. I understand that due to COVID19, this program can be shut down at any time. I may lose my registration fees.

I accept and will follow the above information and protocol.

Parent Name (Printed & signed)

Date

All City Youth Programs

PO BOX 567, FLORESVILLE, TX. 78114

SPORT PROGRAM REGISTRATION FORM

Child Member Information

Last Name	First Name	Date of Birth	Age	Male Female
Address		City & zip		
Parent/Guardian		Home Phone	Cell Phone	
Parent/Guardian		Home Phone	Cell Phone	
Parent/Guardian Email Address				
Emergency Contact other than parents		Home Phone	Cell Phone	
Medical Information/ Medications/Conditions				
Doctor's Contact Information				

SCHOOL INFORMATION

Current School: _____
Current Grade: _____
 Type of School: Public Charter Parochial Private GED Exam METCO Alternative Other _____
School Lunch Verification/Child Eligible for: Free Lunch Reduced Lunch Not Eligible
Race/Ethnicity (✓ all that apply): Black Asian Brazilian Caucasian Latino Caribbean Islands Multiracial Native American
 Pacific Islander Other _____

HOUSEHOLD INFORMATION

Child lives with (please ✓ all that apply)
 Both Parents Mother Only Father Only Aunt/Uncle Sister/Brother Grandparents Guardian Foster Parent
 Step Parent(s) Other _____

Number of People Living in Household:

Number of Siblings: Brothers/Step-Brothers: Ages: 0-12 mos. ___ 2-4 ___ 5-6 ___ 7-9 ___ 10-12 ___ 13-15 ___
 16-18 ___ Sisters/Step-Sisters: Ages: 0-12 mos. ___ 2-4 ___ 5-6 ___ 7-9 ___ 10-12 ___ 13-15 ___ 16-18 ___

Parents who request to move their child up into an older age group: I give permission to move my child up into an older age group and I understand that my child will be playing with older children and could possibly get injured. I do not hold ACYP, the City of Floresville, STYSA, AAYSA or the 4A Corporation liable.

Signed: _____ **Date:** _____

Uniform Shirt Size:	Player T-Shirt Size: [] YS [] YM [] YL [] AS [] AM [] AL [] AXL [] 2XL
	Coach T-Shirt Size: [] YS [] YM [] YL [] AS [] AM [] AL [] AXL [] 2XL
	Team Spirit Shirt: [] YS [] YM [] YL [] AS [] AM [] AL [] AXL [] 2XL

Parental Consent

I parent/guardian of the above-named child, hereby give my permission for his/her participation in the elected sport above this registration form is signed with the understanding that All City Youth Programs (ACYP), the City of Floresville, the 4A Corporation or the San Antonio River Authority will not be held responsible for any sickness or injury that the applicant may receive while in attendance or participating in any of our programs. If the parent cannot be contacted in case of a medical emergency, I give permission to call 911, at my expense. No insurance is provided by ACYP, the City of Floresville, 4A Corporation or the San Antonio River Authority. Refunds will not be given out once practices have begun. Unless I send ACYP a letter to state otherwise; I will allow my child to be photographed for the ACYP web page and other ACYP promotions.

Parent/Guardian Signature

Date

ACYP Seasonal Contract and Fees

Your responsibilities as the parent of the child member of All City Youth Programs are as follows:

Good Sportsmanship: All team members, parents, siblings, and extended family members must display good sportsmanship at all practices, games, meets, fundraisers, and all club functions. We expect each child member and family to behave in such a manner that reflects a positive attitude and respect towards this organization, its volunteers, staff, and others.

Follow the Rules: Smoking or consuming alcohol is prohibited in the presence of our child members during any ACYP functions. Profane or inappropriate gestures are prohibited at games or functions where our members are in attendance. It is prohibited to yell at or get offensive with any club officials (referees), coaches, or any other volunteer or staff. Let us set a good example for our youth!

Support the Program: ACYP is a 501 (c) (3) non-profit corporation. We depend on community service, fundraisers, and donations to make this program work. We would like to thank you for supporting our Programs.

Signature _____ **Date** _____

Please fill in this information it helps the club access additional funding through grants: Combined household income is:

- under \$20,000 under \$30,000 under \$40,000 under \$50,000 under \$60,000 under \$70,000 over \$70,000

Please select the item or items below where you can show your support to this organization:

- Coach or be an assistant coach to a team. (Background checks are required)
 Team parent (working closely with the coaches, organizing team snacks) Background checks required
 Concession- work when your team is scheduled to do concession stand duty
 Help with Soccer fields.

Supplies needed for programs: Soccer: Soccer ball sizes (3-7 years old- size 3, for 8-11 years old -size 4, and for 12 years and up- size 5 ball), shin guards and black shorts and soccer cleats (PeeWee and Kinder league, soccer cleats are optional).

Volleyball: Ball (Primary Lg.- Training ball, Youth Lg. First Touch, and Freshman Lg- Volley Lite), knee pads& black shorts.

Swim Team: Competition at Swim Meets will include an extra \$10 fee to SA Parks & Rec. State qualifiers pay their own way.

Basketball: Ball (Kinder- 22” mini, Youth League 27.5”, Intermediate League 27.5”, Junior 28.5” Senior Lg. 29.5” and black shorts, basketball shoes (no street shoes).

I need a scholarship for my child & agree to pay the membership fee, participate in a fundraiser, and pay any late Fees.

Scholarship applicants understand that we have limited scholarship funds, their acceptance is “first come, first serve”. I have read the above Contract and agree to follow all rules and policies set forth. Parent/Guardian

ANNUAL USAGE FEE January 1st – December 31st	\$20.00 x	
SOCCER- Intramural Program \$60 or Extramural Program (50% of games are away) \$70	\$60/\$70 x	
VOLLEYBALL or BASKETBALL	\$60.00 x	
SWIM TEAM (This fee covers training sessions only)	\$65.00 x	
SEASONAL FUNDRAISER: <input type="checkbox"/> \$25 Donation <input type="checkbox"/> \$28 Shirt w/logo <input type="checkbox"/> \$35 BBQ <input type="checkbox"/> \$45 Sports Backpack	Prices vary	
I would like to Sponsor one team for []\$175 or two teams for [] \$325	\$175/\$325	
Team Spirit Shirts: YS YM YL AS AM AL XL 2XL 3XL (circle your size) Colors:	\$18.00 x	
Late fee	\$10.00 x	
Children’s names playing and in what sport:	Sub Total	
Official Use only: CC _____ Cash ___ Check # _____ BC on file: Yes/No Attached	Total Paid	

