



The 3 vs 3 YMCA indoor soccer tournament will be played at the Berkshire Community Gymnasium (former Sheboygan Falls Middle School). The gym is located at 101 School Street in Sheboygan Falls.

THREE YOUTH DIVISIONS

The divisions are determined by 2021 - 2022 grade and include:

- Coed U8..... Grades 1 - 2
- Boys & Girls U10 Grades 3 - 4
- Boys & Girls U12..... Grades 5 - 6

- **The registration deadline is Friday, March 25, 2022.**
- No refunds will be issued after this date.

The registration will not be processed without the completed registration form and \$80.00 entry fee. Forms may be dropped off, mailed, faxed or emailed to the Sheboygan Falls YMCA. Please note fax and email options are credit card only.

Sheboygan Falls YMCA

305 Buffalo Street
 Sheboygan Falls, WI 53085
 P 920-467-2464 • F 920-467-4641

Email

aliermann@sheboygancountyyymca.org

Additional registration forms may be downloaded from our website:

www.sheboygancountyyymca.org

TOURNAMENT RULES

Teams must follow the YMCA code of conduct: to behave in a manner that upholds the four principles of Caring, Honesty, Responsibility and Respect.

- If a team name violates the code of conduct, the coach will be contacted prior to the tournament to change the team name.
- If team t-shirts are offensive or deemed inappropriate, the team will be expected to change shirts prior to the first game of the tournament.

Teams should consist of 4 or 5 players, but may compete with three players.

Teams are guaranteed three games. The game is played in two 12-minute halves or until a team has a 12 goal differential, whichever comes first. There are no 2-point goals. There will be a 2-minute halftime.

Games tied after regulation play will end in a tie.

Players must report to the gymnasium 10 minutes before game time. A game may be forfeited at the discretion of a referee if a team is not on time.

There are no time outs and no off-sides.

Pool tiebreaker as follows:

- a. Head to head results between tied teams.
- b. Goal differential between the tied teams.
- c. Golden goal play-off; sudden death.

The schedule and rule packet will be emailed to the coach. For more information, please contact Ashley at 920-467-2464 x207 or arietbrock@sheboygancountyyymca.org.



FOR YOUTH DEVELOPMENT®
 FOR HEALTHY LIVING
 FOR SOCIAL RESPONSIBILITY

Sheboygan Falls YMCA

3 vs 3 Indoor SOCCER Tournament

Saturday & Sunday April 9 - 10, 2022

Divisions

- U8 Coed
- U10 Boys
- U10 Girls
- U12 Boys
- U12 Girls

Games
 at the
 Berkshire
 Community
 Gymnasium

former
 Sheboygan Falls
 Middle School



2022 SHEBOYGAN FALLS YMCA 3 VS 3 INDOOR SOCCER TOURNAMENT: 4/9/22-4/10/22

Please PRINT all information. All players will be required to provide proof of age. Falsifying information will result in disqualification from the tournament and forfeiture of the registration fee. The completed form and \$80.00 registration fee must be mailed and postmarked on or before March 25, 2022. Please send form to the:

Sheboygan Falls YMCA, 305 Buffalo Street, Sheboygan Falls, WI 53085 • P 920-467-2464 • F 920-467-4641

Team Name _____ **Coach** _____
Phone _____ Email _____

HOLD HARMLESS AGREEMENT

I hereby agree to waive any claim or liability I may have on the YMCA arising out of use of the facility, and further agree that I will indemnify and save harmless the YMCA from any and all claims brought against the YMCA, its members and volunteers, on account of death, injury, or damage to persons or property received by any persons by reason of the acts or omissions of the users in their use. I also agree to waive any claims against the YMCA, its members and volunteers for injuries or damages that may result from the conduct of other persons, including participants in the program. I understand the above responsibilities and I give permission for my child to participate and be photographed in YMCA activities.

PARENTS - PLEASE SIGN BELOW YOUR CHILD'S NAME TO GIVE PERMISSION FOR PARTICIPATION.

Player #1 _____ Birth Date _____ M F
Address _____ City _____ Zip _____
Parent/Guardian Signature _____ Phone # _____

Player #2 _____ Birth Date _____ M F
Address _____ City _____ Zip _____
Parent/Guardian Signature _____ Phone # _____

Player #3 _____ Birth Date _____ M F
Address _____ City _____ Zip _____
Parent/Guardian Signature _____ Phone # _____

Player #4 _____ Birth Date _____ M F
Address _____ City _____ Zip _____
Parent/Guardian Signature _____ Phone # _____

Player #5 _____ Birth Date _____ M F
Address _____ City _____ Zip _____
Parent/Guardian Signature _____ Phone # _____

Division

- U8 Coed Grades 1 - 2 U12 Boys Grades 5 - 6
- U10 Boys Grades 3 - 4 U12 Girls Grades 5 - 6
- U10 Girls Grades 3 - 4

Team Fee

\$80.00

Payment

- Cash
- Check # _____
- Credit Card # _____ Exp Date _____ 3 Digit Code _____

Receipt # _____ Amount Rec'd _____ Rec'd On _____ Rec'd By _____
22W2-2YTOURSOCC..