

REGISTRATION

Yes! I am interested in enrolling my child in the Y Be Fit program. I understand that this program is for 6th & 7th graders only and that space is limited. Enrollment is at the discretion of the NBIS staff with priority given to new participants.

PARTICIPANT INFORMATION

NAME _____ DOB _____

TEAM _____

PARENT/GUARDIAN INFORMATION

NAME _____

PHONE C _____

H _____

ADDRESS _____

EMAIL _____

OTHER HOUSEHOLD MEMBERS

Name: _____ DOB _____

Name: _____ DOB _____

Name: _____ DOB _____

Name: _____ DOB _____

Please detach this form and return by March 23rd to the NBIS office. The staff will contact you regarding your child's acceptance into this program.

Parents should bring payment to the Y on the first day of class when picking up child.

Member Code of Conduct

Together, we can all do more to help strengthen our community. Toward that end, Central Connecticut Coast YMCA members should consistently celebrate the YMCA core values of caring, honesty, respect, and responsibility with behavior that illustrates those values. The Central Connecticut Coast YMCA reserves the right to suspend or terminate membership privileges for behavior not in accordance with our values.

Liability and Photo Release

I hereby assume full responsibility for any and all damages, injuries, or losses I or any member of my household may sustain or incur while attending or participating in any YMCA exercise and/or program. I hereby waive all claims against the Central Connecticut Coast YMCA, its instructors or partners, individually or otherwise, for any and all claims for injuries or damages I or any member of my household might sustain. I understand that there is a risk of injury associated with participation in any YMCA program and I certify that I and the members of my household are in good physical condition and have no disabilities that might hinder my/our participation. I certify that all of the information provided in this application is accurate and complete. I hereby grant the Central Connecticut Coast YMCA Association my consent and authorization to use images and video of me and the members of my household for the express purpose of helping the Central Connecticut Coast YMCA to promote its scholarships, services, and programs.

Signatures

I have read and agree to the Member Code of Conduct, Liability and Photo Releases above and certify that the information provided in this application is accurate and complete.

Parent Signature: _____

_____ Date _____



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

HEALTHY FUTURES Y Be Fit

FUN AND FITNESS

SOUNDVIEW FAMILY YMCA



OPEN TO 6TH & 7TH GRADE
STUDENTS AT
NORTH BRANFORD
INTERMEDIATE SCHOOL

SIGN UP BY MARCH 23RD



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Y BE FIT

Fitness and Nutrition

This afternoon program is a family approach to a healthy living in children. Developed in cooperation with staff from the Soundview Family YMCA, the East Shore District Health Department and Yale-New Haven Hospital, this program is a practical approach to helping create healthy lifestyle.

The goal is to promote healthy lifestyle habits through nutrition education and fitness activities.

Each Tuesday students will attend a 90 minute session at the Soundview Family YMCA in Branford which includes one hour of fun fitness and 30 minutes of nutrition instruction which includes making healthy snacks.

Your child will learn practical skills about food intake and activity levels. The program will provide opportunities for the students to use the wonderful facilities at the YMCA including the pool and climbing wall.

In order to help your child develop healthy lifestyle practices, parents will be asked to participate in some of the classes and utilize the YMCA for all its facilities and programs.

Fun, Fitness and nutrition opportunity for your 6th or 7th grade child

Program Information

DATE: April 3 – May 29 (8 weeks) no class April 17.

TIME: Tuesdays 2:45pm to 4:15pm

TRANSPORTATION: School bus provided from NBIS to the Soundview Family YMCA. Parents are asked to pick up their child at 4:15 pm. Special arrangements for staying at the Y until 6:00 pm can be made (for an additional fee). Contact Doug at the YMCA 481-9622 for more details.

COST: \$45/child – 8 week program.
Payable to Soundview Family YMCA

FINANCIAL ASSISTANCE: No child will be denied participation because of inability to pay. Contact Doug at the YMCA for more details

Y Be Fit Staff

MICHAEL CASTALDI: Soundview Family YMCA Wellness Staff and ACE Certified Personal Trainer.

AJA GREENE: Soundview Family YMCA Wellness Director and NASM Certified Personal Trainer.

MEGAN RUSCZYK, Physical Education Instructor; NBIS Contact

RITA FOSTER, RN, MSN: Public Health Nurse Coordinator; East Shore Health Department

BARBARA NACLERIO, MPH, CHES: Public Health Educator; East Shore Health Department

Y Be Fit Expectations

Under the guidance of Y Be Fit staff your child will:

- Be introduced to cardio and weight machines
- Participate in a variety of fun indoor and outdoor fitness activities
- Swim with YMCA lifeguards present
- Learn to make healthy food choices
- Create healthy, after school snacks
- Answer survey questions

SCHEDULE - BRING SNEAKERS/SUIT, TOWEL

Free 3 month YMCA Family Membership is included with the program.

Class 1	Boot Camp/Interval Training
Class 2	Fitness Center/Orientation
Class 3	Pool/Swimming
Class 4	Zumba
Class 5	Martial Arts
Class 6	Fitness Center/Cardio & Weights
Class 7	Pool/Swimming
Class 8	Zip Line & Ropes Course



YALE-NEW HAVEN HOSPITAL

