



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# FIGHT FOR YOUR LIFE WHY DO YOU FIGHT?



## 12 Rounds at YSU

Join us for this special version of 12 Rounds by Clemate Franklin. 12 Rounds is a dynamic circuit training, all around boxing format, focusing on agility, flexibility, speed, power, resistance, hand/eye coordination all for a total body experience.

**Saturday, June 30, 2018**

YSU Stambaugh Stadium's Field  
10:00 a.m. to 12:00 p.m.

- Cost is \$35 per person.
- Register at the Central YMCA by 9:00 a.m. on June 30.
- There will be no on-site registration.
- Healthy nutritional snacks and water will be provided.

100% of this event's proceeds go to our Annual Campaign which makes sure no one is turned away by inability to pay for YMCA programs and services.

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12 Rounds Fight For Your Life Registration  
Please sign the waiver on the back on the flyer.

Name \_\_\_\_\_ Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail Address \_\_\_\_\_

Shirt Size: \_\_\_ S \_\_\_ M \_\_\_ L \_\_\_ XL \_\_\_ XXL \_\_\_ XXXL

Would you like to be add to our volunteer e-mail list. \_\_\_ Yes \_\_\_ No

Office Use only: Date: \_\_\_\_\_ Receipt #: \_\_\_\_\_ How Paid (Circle One): Credit Card Cash Check # \_\_\_\_\_

Amount Paid: \$ \_\_\_\_\_ Code to Account: 01-0205-1311

**RELEASE OF LIABILITY**

**Young Men's Christian Association of Youngstown**

I am 18 years of age or older and, if not, my Mother/Father/Legal Guardian has also signed below.

**WAIVER:** I know that participating in a road race is a potentially hazardous activity. I should not enter unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to safely completing the race. I assume all risks associated in biking and running in this event including, but not limited to, falls, contact with other participants, the effects of the weather, traffic, and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of you accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Youngstown YMCA, all law enforcement agencies, all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participating in this event. I also understand that any photos or video taken of me at the event may be used for marketing or promotional purposes. No refunds or transfers for any reason. No Rain Date. Race will be held rain, snow or shine.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

**If Participant is under 18:**

I am the Mother/Father/Legal Guardian of \_\_\_\_\_ (child's name). For the consideration contained herein, I hereby consent to the foregoing on behalf of my minor child.

\_\_\_\_\_  
Signature of Mother/Father/Legal Guardian

\_\_\_\_\_  
Printed Name