



MEXICO AREA FAMILY YMCA
Mexico, Missouri

FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

PICKLEBALL PALOOZA

REGISTRATION FORM



🎱 **EVENT DATE:** FEBRUARY 28th and March 1st (Men's/Women's Saturday, Mixed Sunday)

🎱 **LOCATION:** Mexico Area Family YMCA 1127 Adams St. Mexico Missouri

🎱 **ENTRY FEE:** Each participant will need to register for each division they plan to play. You will be asked your partners name during registration.

Fee: Mexico YMCA Members, \$12/division (Non Members, \$15/division)

Payment due at registration and is non-refundable.

🎱 **DEADLINE:** **WEDNESDAY, FEBRUARY 18, 2026.**

Return this registration form with payment to:

Mexico Area Family YMCA 1127 Adams St. Mexico, MO 65265

You can also register online at mexicoymca.org

FILL OUT ONE FORM FOR EACH DIVISION ENTERED.

NAME: _____ **AGE:** _____

HOME ADDRESS: _____

BEST CONTACT PHONE #: _____

EMAIL ADDRESS (REQUIRED): _____

PARTNER'S FIRST & LAST NAME: _____

DIVISION (CIRCLE ONE): **Women's Double** **Men's Doubles** **Mixed Doubles**

TEAM SKILL LEVEL (CIRCLE ONE): **2.0** **2.5** **3.0** **3.5** **3.75** **4.0+**

WAIVER AGREEMENT:

In consideration of being permitted to utilize the facilities, services, and programs of the YMCA for any purpose including, but not limited to observation or use of facilities and equipment, or participation in any off-site programs affiliated with the YMCA, the undersigned for him/herself and any other personal representatives, executors and administrators, WAIVE, RELEASE, DISCHARGE, AND COVENENT NOT TO SUE the Mexico Area Family YMCA, their directors, officers, employees, and their agents for any and all injuries and other damages which he/she may suffer in connection with his/her participation in the program or any other activities.

SIGNATURE: _____ **DATE:** _____

AMOUNT PAID: _____ **RECEIPT #:** _____ **STAFF:** _____

MEXICO AREA FAMILY YMCA 🎱 mexicoymca.org 🎱 573-581-1540