



VALDOSTA-LOWNDES COUNTY FAMILY YMCA

CHAMPIONS LEAGUE FOR CHILDREN WITH DISABILITIES



MADE POSSIBLE
THROUGH YOUR
GENEROUS DONATIONS



- YMCA Champions League is a year around sports league for boys and girls ages 5 through adulthood, with physical and mental disabilities. The most fundamental goal of the Champion program is to give everyone a chance to play regardless of limitation.
- YMCA Champions League is about more than playing a game. It's about making new friends, building self-esteem and being treated just like other kids.
- To help athletes we use a "buddy" system and pair each player with a Volunteer that is at least 9 years of age through adult. This interaction has proven to be a positive experience for all involved and has resulted in lasting friendships. **BECOME A VOLUNTEER TODAY!**
- Each sport has six, one hour sessions on Monday nights according to the schedule posted. Champions League is offered free as a community service.

2017 SCHEDULE

STARTS AT 6:00 PM

FALL

BASKETBALL

Valdosta-Lowndes County YMCA GYM

OCTOBER 2, 2017 - NOVEMBER 6, 2017

AWARDS: NOVEMBER 13, 2017

WINTER

SOCCER

Valdosta-Lowndes County YMCA GYM

FEBRUARY 6, 2017 - MARCH 13, 2017

AWARDS: MARCH 20, 2017

SPRING

BASEBALL

Freedom Park, Field 6

3795 Guest Road

LAST FIELD ON THE RIGHT

APRIL 10, 2017 - *MAY 15, 2017

*AWARDS: MAY 15 (after play)

SUMMER

BOWLING

Jac's Bowling Lanes

406 Connell Road

JULY 10, 2017 - *AUGUST 14, 2017

*AWARDS: AUGUST 14 (after play)

SWIM LESSONS

YMCA Pool

CHAMPIONS LEAGUE SWIM
LESSONS MAY BE SCHEDULED
DURING SUMMER MONTHS

TROPHIES, CERTIFICATES,
FUN, FRIENDS, AND MORE...

AWARDS CEREMONY
CONCLUDING EACH SPORT!



Contact Cheryl Maddox at
229.244.4646 or cmaddox@valdostaymca.com

Everybody Plays...

Everybody Wins!

www.valdostaymca.org



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VALDOSTA-LOWNDES COUNTY FAMILY YMCA



P.O. Box 1301
Valdosta, GA 31603



CHAMPIONS LEAGUE 2017

BASKETBALL SOCCER BASEBALL BOWLING

Today's Date: _____ Are you a ____ Player or ____ Buddy?

Participant's Name: _____

T-Shirt (Circle Size): S M L XL XXL Youth M

DOB: _____ Gender: _____ Age: _____

Primary Disability(If Player): _____ Organization: _____

Please describe any assistance your player might need: _____

Address: _____

City: _____ State: _____ Zip: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Home Phone: _____ Other Phone: _____

E-Mail _____

Volunteer Signature: _____



I understand that photos of myself or my family, taken as we participate in YMCA activities may be used for publicity purposes.



Contact Cheryl Maddox at
229.244.4646 or cmaddox@valdostaymca.com