

# Union County Family YMCA

## Spring Youth Volleyball League

### Grades 2<sup>nd</sup> – 8<sup>th</sup>



**Dates:** Practice begins week of April 1<sup>st</sup>, 2019

**Season Runs:** April 1<sup>st</sup> – May 26<sup>th</sup>, 2019

**Games:** Games played on Sunday afternoons

1<sup>st</sup> game will be played on April 14<sup>th</sup>

- No Game On April 21<sup>st</sup> (Easter Sunday)

**Fee:** \$65 Members & \$95 Non-Members

**Deadline:** Register by March 20<sup>th</sup>

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### 2019 Spring Youth Volleyball League

(circle appropriate grade)

(2<sup>nd</sup>-4<sup>th</sup>)      (5<sup>th</sup>-8<sup>th</sup>)

Participant's Name \_\_\_\_\_ Shirt Size \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ ZIP \_\_\_\_\_

Age \_\_\_\_\_ DOB \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Parent/Guardian Phone Number \_\_\_\_\_ Parent/Guardian Cell Phone Number \_\_\_\_\_

Parent/Guardian Email Address \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Emergency Contact Number \_\_\_\_\_

Conditions \_\_\_\_\_

**Volleyball Ability:**                      Beginner      /      Intermediate      /      Advanced

**Years played on an organized team:** \_\_\_\_\_ **Practice Night Conflicts** \_\_\_\_\_

How did you hear about our league:    Social Media      Website      School Flyer    Other \_\_\_\_\_

**I will volunteer for (please circle one or more if interested):**

Head Coach                      Assistant Coach                      Referee                      Team Parent (help with phone calls)

I hereby give approval for the participation of my child in any YMCA activities and I assume all risks and hazards to such participation including transportation to and from activities. I waive, release, absolve, indemnify, and agree to hold harmless the YMCA, organizers, supervisors, officers, directors, coaches, participants, and referees.

(Please initial) \_\_\_\_\_ I agree that the YMCA may photograph or videotape my child(ren), and the YMCA may use those photographs or video footage for its marketing purposes. I release the YMCA from any claim or liability related to that use, and waive all claims for myself, my heirs and assignees against the individual staff persons and the Union County Family YMCA.

**\*\*There are no refunds after the registration deadline date\*\***

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Signature of Parent or Guardian

Date



Union County Family YMCA, 1150 Charles Lane, Marysville, OH 43040  
937-303-9285    www.unioncountyyymca.org

**\*\*The Union County Family YMCA cannot guarantee parents/players special requests.**

