



# 2020 Co-ed Youth Volleyball

Green River Parks and Recreation  
April 13<sup>th</sup> - May 14<sup>th</sup>



## Age Divisions for 2019-2020 School Year

\*3<sup>rd</sup>/4<sup>th</sup> Grade \*5<sup>th</sup>/6<sup>th</sup> Grade

### Registration Procedures

**Volunteer Coaches and Asst. Coaches are needed! The number of participants that can register will be dependent on the number of available coaches. Receive free registration for one child and receive a 25 percent discount for additional children.**

Registration for coaches and their children only, will be at the Green River Recreation Center from February 24 through March 2, 2020 during hours of operation. Registration for all other players will be March 3 through March 10, 2020. We will still accept registration for coaches at this time. Call Kevin at 872-0515 with program questions or concerns.

PLAYER NAME \_\_\_\_\_ BIRTH DATE: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

GRADE LEVEL (for the 2019-2020 School Year) \_\_\_\_\_ GENDER (Circle One) F M

SKILL LEVEL (Circle One) Never Played Recreational Advanced (participate in competitive traveling clubs)

PRIMARY PHONE \_\_\_\_\_ TEXT PHONE \_\_\_\_\_ (to receive program updates and upcoming registration information)

MAILING ADDRESS \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

(e-mail address is required to receive program information and updates)

MEDICAL CONDITION(S) List any medical condition(s) that may limit participation during this activity: \_\_\_\_\_

I would like to HEAD COACH or ASSISTANT COACH (please circle) NAME \_\_\_\_\_ (please print name)  
Volunteer as a:

Phone \_\_\_\_\_ Email \_\_\_\_\_

Please print name of person you are coaching with \_\_\_\_\_

### SPECIAL REQUEST AND TEAM ROSTER PLACEMENT:

- Our focus is to create fun and balanced teams. If a request is deemed to create either an unfair skill advantage or disadvantage, GRPR reserves the right to deny or cancel any roster request.
- Siblings in the same age division will placed on the same team. This is considered a special request due to the number of participants involved.
- No player may request to be paired with a coach
- Your child may request one other player to be on the same team. That player must also list your child on their registration form for the request to be valid.

NAME OF REQUESTED PLAYER \_\_\_\_\_

### REGISTRATION FEE (check one)

- \_\_\_\_\_ \$0.00 *Registration fee for one child is waived for Coaches and Asst. Coaches for each age division coached!*
- \_\_\_\_\_ \$28.00 registration fee
- \_\_\_\_\_ \$38.00 registration fee + game jersey (game jersey is \$10.00)
- \_\_\_\_\_ \$21.00 immediate family 25 percent discount registration fee
- \_\_\_\_\_ \$31.00 immediate family discount registration + game shirt (game jersey is \$10.00)
- \_\_\_\_\_ \$10.00 game jersey

### WAIVER

I hereby give my consent and certify that my child is in normal health and capable of participating in the Youth Volleyball Program. I understand that participation in this activity involves certain risks and that regardless of the precautions taken by the Green River Parks and Recreation Department, or the participants, some injuries may occur. I agree that pictures taken during program hours may be used for future promotional purposes.

Parent or Guardian Signature \_\_\_\_\_