



YOUTH SPRING VOLLEYBALL 2016 RECREATIONAL



REGISTRATION: DECEMBER 30, 2015 - JANUARY 27, 2016

Registrations received after 5:00 p.m., January 27, 2016 are not guaranteed placement on a team.

Participant Information:

Name: (Last) _____, (First) _____

Current Grade: _____ School: _____ Date of Birth: _____

Do you play on a Club Team? Yes No Are you a past participant of this program? Yes No

Circle **One** - Shirt Size: (Youth) 6/8 10/12 14/16 18/20 (Adult) S M L XL XXL

Do you live within Jefferson City limits? Yes No Please email receipt (emails are only used by Parks and Recreation)

Parent/Guardian Information:

Primary: (Full Name) _____ Household Email: _____

Address: _____ City: _____ Zip Code: _____

Phone: (Home) _____ (Work) _____ (Cell) _____

Secondary: (Full Name) _____ Secondary Email: _____

Address: _____ City: _____ Zip Code: _____

Phone: (Home) _____ (Work) _____ (Cell) _____

HELP! Please circle the areas where you can help: Coach Asst. Coach Team Parent

Practices: Practice facilities are not provided by Parks and Recreation.

Depending upon the location that your coach can secure practice time, you may have to help with the cost of the rental.

*** 8 MATCH SEASON ~ GAMES BEGIN MID MARCH***

√	Activity #	School	Grade	Night	Location	VB	Early Bird 12/30-1/13	Reg 1/14-1/27
	501072-School		2nd Grade	Monday	TJMS	Lite	\$30	\$35
	501073-School		3rd Grade	Monday	TJMS	Lite	\$30	\$35
	501074-School		4th Grade	Thursday	JCHS	Lite	\$30	\$35
	501075-School		5th Grade	Thursday	JCHS	Lite	\$30	\$35
	501078-School		6-8th Grade	Tuesday	CUCC	Reg	\$30	\$35
	501079-School		High School	Monday	TBA	Reg	\$30	\$35

ANY FALSIFICATION ON REGISTRATION FORM WILL RESULT IN DISMISSAL FROM THE PROGRAM WITH NO REFUND ALLOWED

Payment Method:

Credit Card: VISA MASTERCARD DISCOVER

Cash: (enclosed)

Check: (enclosed)

Account #: _____ - _____ - _____ - _____ Exp. Date: __ / __

Mail or drop-off payment & this form to: Jefferson City Parks and Recreation, 427 Monroe Street, JC, MO 65101
OR

Fax form along with payment information to: (573) 634-6489

The undersigned releases the Jefferson City Parks and Recreation Commission, the Jefferson City Department of Parks and Recreation and its staff, the City of Jefferson, and activity co-sponsors from all liability which may arise from participation of the above named person(s) in the program listed and holds them harmless from such liability. The Department of Parks and Recreation has my permission, both during and anytime after to use the likeness, name, voice, or words of the participant in either television, radio, film, new papers, and the media, and in any form for the purpose of advertising or communicating the purposes and activities of the Department of Parks and Recreation.

Sponsorships are available for those who qualify. Please contact our main office (573) 634-6482 for more information.

Participant (if 18 or older) or Guardian Signature: _____ Date: _____