



# YOUTH SPRING VOLLEYBALL 2017 RECREATIONAL



**REGISTRATION: JANUARY 2 - FEBRUARY 1, 2017**

Registrations received after 5:00 p.m., February 1, 2017 are not guaranteed placement on a team.

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

## Participant Information:

Name: (Last) \_\_\_\_\_, (First) \_\_\_\_\_

Current Grade: \_\_\_\_\_ School Attend: \_\_\_\_\_ 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 on the facility that your coach can secure for practice, you may have to help with the cost of the rental.

Teams will receive a discounted court rental at the Rec Center.

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

√	Activity #	School	Grade	Night	Location	VB	Early Bird 1/2-1/18	Reg 1/19-2/1
	501072-School		2nd Grade	Monday	Rec Center	Lite	\$45	\$50
	501073-School		3rd Grade	Monday	Rec Center	Lite	\$45	\$50
	501074-School		4th Grade B	Thursday	Rec Cent/JC	Lite	\$45	\$50
	501074-Coach		4th Grade A	Thursday	Rec Cent/JC	Lite	\$45	\$50
	501075-School		5-6th Grade	Thursday	Rec Cent/JC	Lite	\$45	\$50
	501078-School		7-8th Grade	Tuesday	Rec Center	Reg	\$45	\$50
	501079-School		High School	Wednesday	Rec Center	Reg	\$45	\$50

## 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: \_\_\_\_\_