

RECREATIONAL YOUTH SPRING VOLLEYBALL 2015

REGISTRATION: JANUARY 12-28

Registrations received after 5:00 p.m., January 28, 2015 are not guaranteed placement on a team.
Fees will increase \$5 for those allowed to register after the January 28 deadline in leagues where there are still spaces available.

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 <input type="checkbox"/> 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.

GAMES BEGIN THE WEEK OF MARCH 9 or 16

√	Activity #	Grade	Night*	Games	Fee**
	501070-school	2nd Grade	Monday	8	\$30
	501071-school	3rd Grade	Monday	8	\$30
	501072-school	4th Grade	Thursday	8	\$30
	501073-school	5th Grade	Thursday	8	\$30
	501074-school	6th-7th Grade	Tuesday	8	\$30
	501076-school	8th-12th Grade	Wednesday	8	\$30



Activity # is determined by the current grade of your child!

There will not be a youth volleyball clinic offered by Dave Harris this year.
Sorry for any inconvenience.



* Game night subject to change due to gym availability

** Fees increase \$5 for those allowed to register after the January 28 deadline

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, newspapers, 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: _____