YOUTH VOLLEYBALL

The YMCA Youth Volleyball league is designed to introduce and advance the game of volleyball to players in the 3rd - 8th grade. Competitive and Developmental divisions are available.

Competitive teams must register as a team, formed by the coach. Equal playing time is not guaranteed and is determined by the coach. 7 players required to participate as competitive.

Developmental teams are formed according to grade, area, or previous team that the player played on. Players on Developmental Teams are guaranteed to receive equal playing time and play by traditional volleyball rules. This division is created to give players the opportunity to learn and prepare them for further play in their athletic careers.

Registration Dates: June 15 - August 24
Late Registration: August 25 - August 31

Program Fees: $50 Y-Members / $65 Non-Members
$10 fee applied to all late registrations
Registration fees do not include uniforms

SAVE MORE!

Register for the volleyball league and clinic to receive a 25% discount towards your clinic registration.

*Discounts cannot be combined. The largest discount will be awarded.

Program Information: 3rd - 8th grade students
Bumper division: 3rd grade (Developmental Only)
Setter division: 4th - 5th grade (Developmental and Competitive)
Spiker division: 6th - 8th grade (Developmental and Competitive)

Season begins October 1 and all teams are guaranteed 7 games.

Volunteer Coaches Needed!
To volunteer complete and submit the Y Volunteer Form. Financial assistance is available to all who qualify. All forms are available online or at the Welcome Center. Please allow 7 - 10 business days for a response.

FMI regarding this program and more:
YMCA Youth Sports Department (325) 655-9106
Youth Sports Director, Stacy Duffell
Assistant, Brittney Smith
Assistant, Quinn Barfield
www.ymcasanangelo.org

Fall 2018 Youth Volleyball – Registration Form

Name: _____ D.O.B. _____

Age: _____ Grade: _____ School: _____

Address: _____ Zip: _____

Primary Contact Name: _____

Primary's E-mail Address: _____

(If no email, please put the player's firstname.lastname@saymca.com)

Cell Phone: _____ Cell Phone Carrier: _____

Alternate Contact Name: _____

Alternate Contact Cell: _____ Relation: _____

Division (by grade)

___Bumpers(3rd) ___Setters(4-5th) ___Spikers(6-8th)

League Type

___Competitive (must be listed on submitted coaches roster)
If the team does not make, players will be moved to the Developmental League and placed on a team.

___Developmental (players registering as an individual)

Player Classification: ___Returning ___New Player

Team Information

Spring 2018 Team Name _____ Spring 2018 Head Coach Name _____

Do you want to return to the same team? _____

Competitive Teams must have at least 7 players on a team to participate in the league.

YMCA Mission: The San Angelo YMCA will serve the people in the community of all faiths and ages with emphasis on families and youth, to permit them to achieve their God-given potential in spirit, mind, and body through its programs, staff, facilities, and the community.

WAIVER: I hereby, for myself and my agents, waive and release any and all rights and claims which I may have, or which may accrue against the YMCA of San Angelo and its respective officers, agents, sponsors, or any employees for any injury which ma y be suffered in connection with my child's participation in this activity. I hereby acknowledge that this program provides no insurance coverage and my own insurance will be used in case of an accident. By signing below, I am giving my permission for my child's picture to be taken and used for promotional purposes of the YMCA Sports Department.

REFUNDS: Full refunds will be issued only upon cancellation of the program. Should a refund be requested prior to the first game, a $5.00 fee will be assessed.

Parent's Signature: _____ Date: _____

Parent's Name Printed: _____

Forms may be mailed to:
YMCA Youth Volleyball League
353 S. Randolph
San Angelo, TX 76903