

FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY

## PASS, SET, SPIKE Spring Youth Volleyball League

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 in the competitive division.

**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:** January 1 – February 23 Late Registration: February 24 – March 1

**Program Fees:** \$60 Y-Members / \$70 Non-Members \$15 fee applied to all late registrations Registration fees do not include uniforms

**Program Information:** 3rd – 8th grade students Bumper division: 3rd grade (Developmental Only) Setter division: 4th – 5th grade (Developmental and Competitive) Spiker division: 6th grade (Developmental and Competitive) Setter division: 7th & 8th grade (Competitive Only)

Season is scheduled to begin the last week of March and all teams are guaranteed 7 games. Games played on Monday, Tuesday and Thursday evenings at the Y.

## **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.

## FMI regarding this program and more:

YMCA Youth Sports Department (325) 655-9106 Youth Sports Director, Stacy Duffell Assistant, Quinn Barfield www.ymcasanangelo.org



## Spring 2020 Youth Volleyball – Registration Form

Name:			D.O.B.
			Zip:
Primary	Contact Name:		
(If no em	ail, please put the p	player's firstname	lastname@saymca.com)
Cell Phor	าย:		Cell Phone Carrier:
Alternate	e Contact Name:		
			Relation:
Division	ı (by grade)		
Bump	pers(3rd)Set	ters(4-5th)	_Servers(6th)Spikers(7th & 8th)
League <sup>.</sup>	Туре		
	petitive (must be lis n does not make, player		coaches roster) e Developmental League and placed on a team.
Deve	lopmental (players	registering as an	individual)
Player C	lassification:	Returning	New Player
Team In	formation		
Fall 201	9 Team Name		Fall 2019 Head Coach Name
Do you w	vant to return to th	e same team?	
**Compe	titive Teams must h	ave at least 7 pla	ivers on a team to participate in the league.**
	permit them to achieve	•	people in the community of all faiths and ages with emphasis on families and ntial in spirit, mind, and body through its programs, staff, facilities, and the
against the in connect and my ow	e YMCA of San Angelo a ion with my child's part	and its respective off icipation in this activ d in case of an accide	nd release any and all rights and claims which I may have, or which may accrue Ficers, agents, sponsors, or any employees for any injury which ma y be suffered wity. I hereby acknowledge that this program provides no insurance coverage ent. By signing below, I am giving my permission for my child's picture to be A Sports Department.
	: Full refunds will be iss will be assessed.	ued only upon cancel	llation of the program. Should a refund be requested prior to the first game, a
Parent's	s Signature:		Date:
Parent's	s Name Printed:		
Forms ma	y be mailed to: uth Volleyball League		

353 S. Randolph San Angelo, TX 76903