

FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

# SPIKE! YOUR! FUN! Youth Volleyball

The YMCA youth volleyball league is designed to introduce and advance the game of volleyball to players in the 3rd - 8th grades. Club and Recreational divisions are available.

Club teams: (For players with a little more experience in the sport or wanting to play with a certain group of players)

Players will need to register individually. Coaches must turn in a roster for the team. Equal playing time is not guaranteed and is determined by the coach. 7 players are required as a minimum on their roster to participate in club divisions. Players must be between 4th to 8th grade.

\*3rd grade cannot sign up as a team and will compete in the recreational league. However, if the team is willing, they can choose to compete in the club 4/5 grade league.

### Recreational teams:

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

\*Players must be between 3rd to 8th grade.

# **Registration Dates:**

January 15 - February 22, 2024

Late Registration: (late feels apply)

February 23 - February 29, 2024

Fees: \$60.00 for Y-Members

\$75.00 for Non-Members

Register for Youth
Volleyball league and the
Clinic to receive

25% OFF

the clinic registration. Restrictions might apply.

## BE A VOLUNTEER COACH.

To volunteer, please fill out the Y Volunteer Form and submit it to the Welcome Center, or complete the form online. All forms are available online or at the Welcome Center.

Volunteer coaches have varying levels of skill, knowledge, and experience. They will coach both practices and games and are not screened for knowledge; however, all coaches must pass a background screening.

The coach's meeting is scheduled for March 3. Time is TBA

Practices will start in early March.

Matchplay will start in late March.

Financial assistance is available!

Registration fees do not include uniforms

FMI regarding this program contact the YMCA Youth Sports Department @ (325) 655-9106

# Youth Volleyball Registration Form

Participant Infor	mation:											
First and Last Name: _	DOB:											
Age:		Grade:			Gender: For	М	School:_					
Mailing Address:						_ City:			_ State:	Zip	Code:	
Additional Information	n we may n	eed to know	/ (conditio	ns, allergi	es, injuries):							
Primary Contact In	nformatio	n:										
First and Last Name	! <b>:</b>						R	elations	hip:			
Cell Phone Number:					Cell Phone Carrier:							
Primary Contact Em	ail:											
	**Comn	nunication	done th	rough e	mail to the	primar	y contact,	please	write legil	bly.**		
<b>Emergency Contac</b>	t:			_		-		-	_	•		
First and Last Name	:											
$ {\sf Cell\ Phone\ Number:}$		Relationship:										
REGISTRATION FEES			•					HES				
T-shirt Size: (Circle One)	YS	YM	YL	AS	AM	AL	AXL					
LEAGUE TYPE:												
Club (must be li	sted on h	ead coach	's suhmi	tted ros	ter)							
If the team does not mak Center or by contacting t Division (by grade)	e it, players he sports de	will be moved partment.	to the recr	eational lea	ague and place	d on a tea	m. Club coacho	es will nee	d to turn in a	separate r	oster found at the	: Welco
Setters(4-5th) _			•	-								
Recreational												
Division (by grade)	5 ··· (	(4 E.I.)	<b>5</b> 11 (4	7	0.011							
Bumpers(3rd)	Setters(	4-5th)	_Spikers(6	oth, /th,	& 8th)							
Player Classification	1:	Returning		New Play	er							
TEAM INFORMATIO												
Fall 2023 Team Na	me			or F	lead Coach	Name _						
Do you want to ret												
	**Clu	b teams m	ust have	at leas	t 7 players	on a te	am to part	ticipate	in the leag	gue.**		
YMCA MISSION: The mission given potential in mind, body		-	-		•	ll faiths and	d ages, with emp	ohasis on fa	milies and youtl	h, to permit	them to achieve the	ir God-
WAIVER: I hereby, for myself employees for any injury or a provides no insurance covera follow all policies outlined in	any communic age, and my o	able illness suc wn insurance w	h as COVID-1 ill be used in	19 which may the case of	y be suffered in an accident. By (	connection enrolling/reg	with my child's p gistering my chil	participatio	n in the program	n. I hereby a	cknowledge that the	progra
PHOTO RELEASE: Additionall of San Angelo for promotion of San Angelo, The National reproduce, edit, broadcast o publication, display, or exhib reproductions; however, I sh	nal purposes. F Council of You or rebroadcast pition thereof	or my participa ung Men's Chris any video film, in promotions,	ition in activi itian Associa footage, sou advertising, a	ties to be co tions of the l ndtrack reco and legitimat	nducted by the ' United States of ordings and phot e business uses	MCA of Sa America (Y o reproduct without any	n Angelo hereby MCA of the USA ions of me/and compensation	give my pe ) and third or my narra to, and/or o	rmission and co parties collabora itive account of	nsent, now a ating with Y my experier	and for all time, to t MCA of San Angelo nce at YMCA of San	he YMC to make Angelo f
REFUNDS: Full refunds will b	e issued only	upon cancellati	on of the pro	gram. Should	d a refund be rec	uested pric	r to the first me	eeting. A \$1	0.00 fee will be	assessed.		
Parent's Signature	e:							Dat	e:			
n												
Parent's Name Pri	nted:											