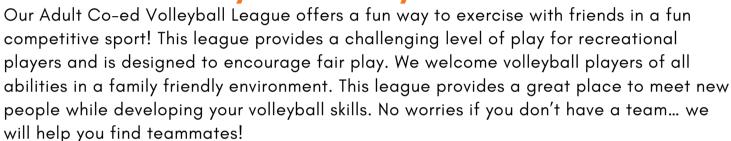


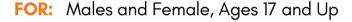


Be Healthy Be Strong Belong

Adult Volleyball Spring 2023

Alamance County Community YMCA





WHEN: March 20th-May 23rd 2023

Registration period January 30th-February 24th, \$10 late fee after February 24th

COST: \$30 for Y Members, \$50 for Program Participants

TIME: Fridays 6:00 PM-8:00PM

LOCATION: ALAMANCE COUNTY COMMUNITY YMCA

1346 S. Main Street

Burlington, NC 27215

336.395.9622

www.acymca.org

CONTACT: Mick Pettyjohn, mpettyjohn@acymca.org





Adult Volleyball Registration Form Spring 2023

Name	
Male Female Birth Date / /	
Address	
City Zip	
Home Phone () Years Played (circle one): 1 2 3 4 5	
Email Address	
Parent Contact Name (if under 18)	
Parent Contact Phone (if under 18)	
T-Shirt Size (Please Circle One): AS AM AL AXL AXXL	
PLAYER'S AGREEMENT The goal of the YMCA Adult Volleyball League is to promote safe, clean, amateur sport and recreation in a Christian atmospher play, participation and teamwork are the expected results, while winning at all cost is discouraged! Players, parents and spect pected to conduct themselves in a sportsmanlike manner that is conducive to the Mission and Philosophy of the YMCA. I have read, understand and agree with the goals of the YMCA Adult Volleyball League. I certify that I am in normal health and I am capable of participating safely in the 2023 YMCA Adult Volleyball League. I release/authorize the use of any pictures that may be taken for publicity, etc. in connection with the YMCA. I understand that all Registration Fees have to be paid at the time of Registration. I understand that I cannot participate placed on a roster, until I have fully completed the registration process. I acknowledge the YMCA reserves the right to reclassify, reassign, etc. players, teams, leagues, and reserves the right to deceparticipation of players, parents, coaches, spectators, pertaining to this League. I understand that certain risks are involved in playing sports. I understand the potential for personal injury to myself while	ators are ex- te, nor be
participating in the YMCA Adult Volleyball League. I hereby release the Alamance County Community YMCA, Inc., all agents, staff, and volunteers from any liability in connectio League(s) and agree to abide by any/all decisions made by the staff.	
Each year the Y raises money to provide financial assistance for children that otherwise cannot afford to participate in YMCA programs. If you won make a donation, please indicate below and someone will contact you. Thank you for helping us impact the lives of children in our community. Name: Phone	
Signature Date	