

FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY

# WHERE ALL PLAYERS ARE MOST VALUABLE

## Youth Volleyball Spring 2023 ALAMANCE COUNTY COMMUNITY YMCA

Have fun with friends and learn the skills and fundamentals of the game of Volleyball. Children are sure to come away with a positive experience regardless of their skill level. Groups will be split up into three Co-ed divisions. Boys and girls are encouraged to register. Bronze Division ages 7-9, Silver Division ages 10-12 and Gold division ages 13-16.

#### REGISTRATION FORM ON THE BACK

WHEN :	March 20th- May 23rd 2023
	Registration period January 30th– February 24th, \$10 late fee after February 24th
COST:	\$50 for Y Members, \$80 for Program Participants
TIME:	Practices: Monday-Thursday, 6:00pm - 8:00pm
	Games: March 31st-May 23rd
	(No practices or games April 10th-15th)
LOCATION:	ALAMANCE COUNTY COMMUNITY YMCA
	1346 S. Main Street
	Burlington, NC 27215
	336.395.9622
	www.acymca.org
CONTACT:	Mick Pettyjohn, mpettyjohn@acymca.org



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### Youth Volleyball Registration Form Spring 2023

First Name			Last Name							
MaleFemale	Birth Date	/	_/	Years played (circle one):	1	2	3	4	5	
Mailing Address										
City			State	Zip						
Preferred Phone	Em	ail Addre	ess							
Parent's First NameParent's Last Name						· · · · · ·				
I WOULD LIKE TO BE A VOLUNTEER COACH: Y N Name:										
I WOULD LIKE TO REQUEST A SPECIFIC COACH: Y N Name:										
Please circle division: Bronze ( Ages 7-10) Silver( Ages 8-11) Gold (Ages 12-16)										

#### PLAYER'S AGREEMENT

The goal of the YMCA Youth Volleyball League is to promote safe, clean, amateur sport and recreation in a Christian atmosphere. Fun, fair play, participation and teamwork are the expected results, while winning at all cost <u>is discouraged</u>! Players, parents and spectators are expected to conduct themselves in a sportsmanlike manner that is conducive to the Mission and Philosophy of the YMCA.

- $\sqrt{}$  I have read, understand and agree with the goals of the YMCA Youth Volleyball League.
- V I certify that I am in normal health and I am capable of participating safely in the 2023 YMCA Youth Volleyball League.
- $\sqrt{}$  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, nor be 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 decline the participation 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 participating in the YMCA Youth Volleyball League.
- $\sqrt{}$  I hereby release the Alamance County Community YMCA, Inc., all agents, staff, and volunteers from any liability in connection with the

Each year the Y raises money to provide financial assistance for children that otherwise cannot afford to participate in YMCA programs. If you would like to make a donation, please indicate below and someone will contact you. Thank you for helping us impact the lives of							
children in our community Yes Nam	le:						
Player's Signature	Date						
Parent's Signature	Date						