



**Kent Parks & Recreation Department
2011 YOUTH VOLLEYBALL
(Instruction and league format)
3rd – 8TH GRADE BOYS AND GIRLS**



DEADLINE: FEBRUARY 25, 2011

NAME _____ **SCHOOL** _____

ADDRESS _____ **Boy** ____ **Girl** ____

BIRTHDATE ____/____/____ **GRADE 2010-2011 SCHOOL YEAR** _____

HOME PHONE _____ **PARENT'S CELL PHONE** _____

League Cost

\$ 45.00 resident \$ 53.00 Non Resident

Late fee of \$5.00 after February 25th

Kasey Adelman High School Girls varsity volleyball coaches will be organizing the program.

PROGRAM DESCRIPTION:

The Kent Youth Volleyball program is offered to girls and boys who are in 3rd – 8th grade to learn and enhance their skill of volleyball in a league setting. For players at the middle school level, this is a great opportunity to improve your play during the off season.

Dates and Location

SEASON: MARCH 2 – APRIL 27

DAY: WEDNESDAY'S

LOCATION: STANTON GYM

3rd - 5th grades: 5:00 p.m – 6:30 p.m
6th - 8th grades: 6:30 p.m – 8:00 p.m.

NO GAMES THE WEEK OF SPRING BREAK

Coaches will have practices and games throughout the 8 week program.

T-SHIRT SIZE: (circle size) **Child:** Sm Med Lg. **Adult:** Sm Med Lg XL XXL

Waiver of Liability / Parental Consent / Photo Release

Waiver – I intending to be legally bound, do hereby for myself, my heirs and assignees, waive any and all claims to damages I may have against Kent Parks and Recreation Dept., Kent City Schools or any agent or representative of the afore mentioned and give my permission for

_____ to participate in the Kent Youth Volleyball Program. Photographs and videos are periodically taken of participants during programs. Please be aware that these photographs may be used for Parks & Recreation publication, local newspapers, and/or web-site.

Print Parents Name _____ Signature of Parent _____

Date _____

**SEND REGISTRATION FORM TO: Kent Parks and Rec, 497 Middlebury Road,
Kent, OH 44240 with your check or money order. If additional information is
needed, call 673-8897.**

OFFICE USE ONLY: CITY _____ TOWNSHIP _____ FEE _____ RECEIPT # _____

Refund Policy:

Prior to the first game: A letter of explanation submitted to the Director, full refund will be granted

After the first game: No refund will be granted unless a health related situation then you will be refunded less any direct uniform cost if it occurs prior to the beginning of the 2nd half of the season.