

2018 4X4 Youth Volleyball League Boys and Girls grades 5th-12th

Bump, set, spike! Improve your volleyball skills and have fun through team practice and competition. Participants will be divided into co-ed teams based on grades: 5th/6th, 7th/8th, and 9th/12th. Please indicate preferred team members on the registration form. Maximum roster size is six players. Teams will have practices and

games and conclude the season with a one-day tournament. All players will receive a team t-shirt that they will wear to games. Participants need to wear gym shoes and comfy clothes. Kneepads are encouraged but not required.

Dates, Location and Times

Saturdays beginning March 24 through May 19th at North Elementary School between 11:30 am- 5:00 pm. (March

24, April 7, April 14, 21, 28, May 5, 12, 19 [May 19 will be used only if one of the other dates doesn't work]). Participants will be called on Monday, March 19 to let participants know what time they will be scheduled on Saturday, March 24. Schedules and t-shirts will be passed out on March 24.

(Dates and times are subject to change)

Registration

Participants may register online by visiting our website at www.godfreyil.org or during regular office hours (*Monday-Friday, 8 am*

-12 pm; 1-5 pm) or by mail to: Godfrey Parks and Recreation, P.O. Box 5067, 6810 Godfrey Rd. Godfrey, IL, 62035.



Fees

| Early Registration • January 22 - February 16 | | | • Regular Registration • February 20 - March 16 | | |
|---|----------|------|---|------|--|
| Early Registration | Resident | \$35 | Non-Resident | \$45 | |
| Regular Registration | Resident | \$40 | Non-Resident | \$50 | |

For more information, please call 466-1483, or visit our website www.godfreyil.org. We can also be

| found | on | |
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facebook.

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and

| 2018 4 | X4 Youth Volle | yball League | 3ui/0ui /ui/8ui | 9th/12th | | | | | | |
|--|------------------|--------------|---------------------------|-----------------------------|--|--|--|--|--|--|
| Name | | Male Female | SHIRT SIZE YS YM YL AS | (Circle One) S AM AL AXL | | | | | | |
| Address | City | Zip | _ Phone | | | | | | | |
| Birth date/ Age | School Attending | | Grac | le | | | | | | |
| Teammates (if requesting) | | | | | | | | | | |
| Email Address | | | | | | | | | | |
| Any Medical Conditions? Yes No | | | | | | | | | | |
| Emergency Contact | Re | lationship | Phone | | | | | | | |
| ***I, the undersigned parent or legal guardian of the above named child, do hereby consent that he/she may participate in the 2018 4X4 Youth Volleyball League. It is agreed that the named organization or employees assume no legal liability for injuries or other loss as a result of participation. Godfrey Parks and Recreation Department reserves the right to take any pictures used for publication. | | | | | | | | | | |
| Signature of Parent/Guardian | | Date | | RE: NE: | | | | | | |
| Name Printed | | | _ | RR:NR: | | | | | | |