

Saints Rose of Lima School
CAL Volley Ball Registration Form
2018 Season

If you are in grades 6, 7 or 8 and are interested in joining the Volley Ball team, please complete the form below and return it to school/parish by **FEBRUARY 5, 2018**

The 2018 season will begin on March 2018 and conclude by the middle of May 2018.

Player Information:

Player's Name: _____ Date of Birth: _____ M/F

Player's Address: _____

Parent's Address (if different): _____

Grade: _____ Did the Player Run Last Year? Yes: _____ No: _____

Parent Information:

Father's Name: _____ Home # _____

Cell #: _____ would it be ok for the Coach to text you **Yes or No** (Please circle one)

Father's e-mail address: _____

Mother's Name: _____ Home _____

Cell #: _____ would it be ok for the Coach to text you **Yes or No** (Please circle one)

Mother's e-mail address: _____

Any medical condition player's coach should be aware of? _____

Player's T-shirt Size:

Y - Small _____ Y-Med _____ Y - Large _____

A - Small _____ A _ Med _____ A - Large _____ A- XL _____

Costs:

\$40 per player

Amount Paid: \$ _____ Cash: _____ Check Number: _____

Checks to be made out to: ST. Rose of Lima School

****** SIGN PERMISSION FORM ON REVERSE SIDE **** (unless
printed from website, please print all forms)
**** Year End Celebration will be held on June ******