

Adult Volleyball: Spring '17

Pike County YMCA (740) 947-8862

www.pikecountyyymca.org



Registration Deadline:

Sunday, March 26th

Please Complete Both Sides

Team Roster

The following information must be collected and complete, prior to participation.

Last Name	First Name	Home Address (please include city and zip)	Emergency Contact	Emergency Contact Phone #

Coaches Waiver

I, the above named coach of this team, wish to register my team in the YMCA Volleyball League. I hereby state that all the above information is true and that all my players meet the age requirements for the division in which we will be competing. Furthermore, I agree to conduct myself with sportsmanship and instruct my team to do the same.

Signature _____ **Date** _____

