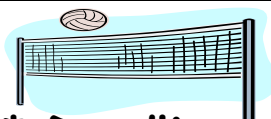


Wabash Valley Youth in Action

VOLLEYBALL 2017

The YIA Volleyball season will be **October 23rd-December 5th**. Volleyball is open to grades 3rd-5th. All participants will need knee pads. Games and practices will be on Mondays and Tuesdays* each week.
*subject to change



Final Registration* Deadline- September 29th

*An additional fee may be added if applications are received after this date

Youth in Action Members

\$40

Non-Members

\$50

\$5 discount for additional children

RETURN THIS PORTION AND FEES TO: Wabash Valley Youth in Action, 400 N. Market St, Mt. Carmel, IL 62863

PLAYER'S NAME: _____

AGE: _____ DATE OF BIRTH: ____/____/____ SEX: M / F

Has your child played YIA (formerly YMCA) Sports before: YES NO

SCHOOL: _____ GRADE: _____

SHIRT SIZE: 6-8 10-12 14-16 ADULT SM ADULT MED ADULT L

PARENT'S NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ CELL PHONE: _____

EMAIL: _____

Can you volunteer: coach* asst. coach
If volunteering, have you ever been convicted of a felony?
Yes No

*All coaches will be subject to a background check prior to coaching.

Shirt Size: MEDIUM LARGE X-LARGE XX-LARGE

Payment Method (please mark):

Cash Check # _____

Paypal (online) www.wvyouthinaction.org

Scholarship (application **MUST** be submitted)

I would like to make a \$5.00 tax-deductible contribution to Wabash Valley Youth in Action, Inc. to help support a child who may not have the ability to pay. Donation is enclosed with my registration fee.

WAIVER AND DISCLAIMER OF LIABILITY & CONSENT TO MEDICAL CARE

To persuade the Wabash Valley YIA to accept the registration and permit the participation in YIA Volleyball by the above named individual, I hereby give my consent to agree to release indemnity, and hold harmless the Wabash Valley YIA and Wabash Community Unit School District #348, their officials, coaches, and representatives from any claim arising out of any injury to the above named individual while participating in any YIA Volleyball sanctioned activity or while in transit to or from thereto. I, also, hold harmless the Wabash Valley YIA and Wabash Community School District #348, their officials, coaches, and representatives from any claims arising out of injuries or conditions caused by or aggravated by my refusal to obtain available medical treatment based on religious or philosophical beliefs.

Should the above named individual require medical care for either illness or injury, I give my consent for any appropriate medical treatment by a person certified to perform such acts.

ACKNOWLEDGEMENT (parent/legal guardian) _____

No child will be denied the opportunity to play due to inability to pay. Scholarship applications are available at the YIA located at 400 N. Market Street (inside First Mid Bank) OR on our website www.wvyouthinaction.org. Questions? Call the office at 618-263-4230.