

# 2023 Tri-City Fall Volleyball

Deadline Friday, October 6, 2023

## Volleyball League

3rd & 4th Grade Division  
Co-Ed Teams

The volleyball program is designed to develop individual skills and basic fundamentals of the game in a team setting. Games begin in November.



## Volleyball League

5th & 6th Grade Division  
Co-Ed Teams

The volleyball program is designed to develop individual skills and basic fundamentals of the game in a team setting. Games begin in November.

- **Games:** Will be played at the Roxana Community Gym. Games will be played on week nights & Saturday mornings. \*No team registrations. Games will begin in November.
  - **Includes:** 10 game schedule and league shirts  
No refunds will be given.

**Fee:** \$45 (A \$5 late fee will be added after the deadline; Friday, October 6, 2023)

Register In-Person at the Wood River Round House  
633 N. Wood River Ave. Wood River, IL 62095  
Mon-Fri: 8am-12pm, 1pm-5pm or

Register Online @ [wrparks.org/youth-programs](http://wrparks.org/youth-programs)

The success of our programs is dependent upon Volunteer Coaches:

Would you be a(n): Coach  Yes  No Assistant  Yes  No

Mandatory for all coaches & assistants to fill out a coaches background check. This is for the safety of our children.

Circle t-shirt Youth Size: YS(6-8) YM(10-12) YL(14-16) Adult Size: AS AM AL AXL

DIVISION \_\_\_\_\_ DID YOU PLAY LAST YEAR? IF YES, WHICH TEAM \_\_\_\_\_  
The Tri-City Agencies are responsible for determining which roster a child is placed on, not Coaches or Parents!

CHILD'S NAME \_\_\_\_\_ M / F Height \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

SCHOOL ATTENDING \_\_\_\_\_ GRADE \_\_\_\_\_ D.O.B \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ AGE \_\_\_\_\_


EMAIL ADDRESS \_\_\_\_\_

ANY MEDICAL CONDITIONS? \_\_\_\_\_

EMERGENCY CONTACT \_\_\_\_\_ PHONE \_\_\_\_\_ RELATION \_\_\_\_\_

COACH REQUEST \_\_\_\_\_ PLAYER REQUEST \_\_\_\_\_

I, the undersigned parent or legal guardian of the above named child, do agree to abide by the Parents Code of Ethics. I do hereby consent and agree that the above named minor may participate in the Tri-City Recreation Program. I understand and acknowledge that there are certain risks of physical injury associated with my child's participation in the above named program which may occur through no fault of any volunteer, participant, employee, or officer of the Tri-City Recreation League, Bi-City Recreation League, Wood River Recreation, the City of Wood River, Roxana or East Alton and/or any other sponsor or party. Photos taken at event could be used for advertisement. If you do not want your child's photo posted please let the staff know.

 Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

**OFFICE USE ONLY:** DATE: \_\_\_\_\_ AMOUNT PAID \_\_\_\_\_ RECEIVED BY \_\_\_\_\_