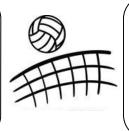
## 2024 Tri-City Fall Volleyball Deadline Friday, October 4, 2024

<u>Volleyball League</u> 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



<u>Volleyball League</u> 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, East Alton Keasler Complex and Wood River Recreation Center. Games will be played on week nights & Saturday mornings. No team registrations. Games will begin in November.

• Includes: 12 game schedule and league shirts

Fee: \$50 (A \$10 late fee will be added after the deadline; Friday, October 4, 2024) - NO REFUNDS \*Registration can be done in person at the Wood River Rec Center:655 N Wood River Ave, \*Registrations can be done online at http://apm.activecommunities.com/woodriver/Activity Search/

The success of our programs i   Would you be a(n): Coach Yes   Mandatory for all coaches & assistants to fill out a coaches				_No
Mandatory for all coaches & assistants to fill out a coa	aches background che	CK. This is for	the safety of c	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 Y The Tri-City Agencies are responsible for determini	EAR? <b>IF YES</b> , WHIC⊢ ng which roster a ch	I TEAM	on, not Coa	ches or Pare
CHILD'S NAME		M / F	Height	
ADDRESS	PHO	NE		
SCHOOL ATTENDING	GRADE	D.O.B	//	AGE
EMAIL ADDRESS				
ANY MEDICAL CONDITIONS?				
EMERGENCY CONTACTP	HONE	RELATI	ON	

## Parents Code of Ethics:

• I will encourage good sportsmanship by demonstrating positive support for all players, coaches, park and recreation employees and officials at every game or practice.

• I will place the emotional and physical well being of my child ahead of any personal desire to win.

• I will insist that my child play in a safe and healthy environment.

• I will provide support for coaches and officials with my child to provide a positive, enjoyable experience for all.

• I will remember that the game is for children and not for adults.

• I will ask my child to treat other players, coaches, fans and officials with respect regardless of race, sex, creed or ability. 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 River 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 and/or any other sponsor or party.

Signature of Parent of Legal Guardian		Date		
OFFICE USE ONLY: DATE:	_AMOUNT PAID	RECEIVED BY	RECIEPT #	