

# CHANGE A CHILD'S LIFE

Remember a Coach that made a difference in your life?



Without volunteer coaches, we would not be able to offer our quality Youth Sports Programs. No experience necessary and the majority of our coaches are parents with a similar philosophy to the Y: sportsmanship and fun are primary goals; winning and losing are secondary.

Our insurance company has mandated that we do a background check on all of our volunteers who work with kids. When you complete the "Volunteer Coach" form below, you will be authorizing the Y to do a reference check.

## VOLUNTEER COACH 1 REGISTRATION

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

MALE  FEMALE DATE OF BIRTH \_\_\_\_\_

## VOLUNTEER COACH 2 REGISTRATION

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

MALE  FEMALE DATE OF BIRTH \_\_\_\_\_

The responsibilities of a coach include promoting the Y philosophy to players, making sure all children get equal playing time, attending a coaches meeting and using yourself as a model of sportsmanship and fair play. The Y will provide you with all the resources you will need to effectively lead a young team through a successful season.

# BUMP, SET, SPIKE



## YOUTH VOLLEYBALL LEAGUE

SPENCER FAMILY YMCA  
1st - 6th Grade

712-262-3782



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# SPENCER YMCA YOUTH VOLLEYBALL LEAGUE

**WHO:** Boys & Girls 3<sup>rd</sup> - 6<sup>th</sup> Grade

**WHEN:** August 21 - October 12  
Practices: Start week of August 21  
Games: Start Saturday, September 9 - October 14

## DIVISIONS

GRADE	BOYS	GIRLS
1st-2nd	#	#
3rd-4th	#	#
5th-6th	#	#

**WHERE:** Practice: Lincoln Elementary School or Spencer Family Y  
Games: Spencer Family Y

## REGISTRATION DEADLINE: August 11

**FEES:** Member: \$30      Program Participant: \$60  
Late Registration Fee (If Spots Open) after August 11  
Member: \$35      Prog Part: \$70

**UNIFORM:** All players will receive a shirt to be worn on game days.

**UPDATES & INFORMATION:** Follow the Facebook page:  
Spencer Family YMCA

**QUESTIONS:** Contact Paige Gaedke at [pgaedke@spencerymca.org](mailto:pgaedke@spencerymca.org)



# REGISTRATION

DIVISION		MEMBERSHIP		SHIRT SIZE			
<input type="checkbox"/>	1 <sup>st</sup> -2 <sup>nd</sup>	<input type="checkbox"/>	Boy	<input type="checkbox"/>	Y Member	<input type="checkbox"/>	Youth Sm
<input type="checkbox"/>	3 <sup>rd</sup> -4 <sup>th</sup>	<input type="checkbox"/>	Girl	<input type="checkbox"/>	Program Part.	<input type="checkbox"/>	Youth Med
<input type="checkbox"/>	5 <sup>th</sup> -6 <sup>th</sup>					<input type="checkbox"/>	Youth Lg
						<input type="checkbox"/>	Youth XL

**PLAYER INFORMATION**

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Birthdate \_\_\_\_\_ Age \_\_\_\_\_

Grade \_\_\_\_\_ School \_\_\_\_\_

**PARENT INFORMATION**

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**LIABILITY WAIVER**

I knowingly register my child for this activity and do so at my own risk and personally assume responsibility for any injuries or other damages they may incur as a direct result of their participation. I understand that my child may be included in promotional photos.

This waiver needs to be signed for your child to participate in the Spencer Family YMCA youth Volleyball League.

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Date: \_\_\_\_\_

Check      Cash      Credit Card      Amount Paid \_\_\_\_\_

Receipt#: \_\_\_\_\_