



PLYMOUTH FAMILY YMCA FALL GIRLS VOLLEYBALL LEAGUE

YMCA volleyball programs build character and instill values of fair play and teamwork while providing important exercise and physical development. Every child can excel at the skills that matter most through drills, games, and team circles that focus on the YMCA's four core values of Caring, Honesty, Respect and Responsibility.

PRACTICES BEGIN SEPTEMBER 13

GAMES BEGIN SEPTEMBER 17

GAMES END OCTOBER 30

REGISTRATION DEADLINE:

September 8

COACHES MEETING:

September 9, 6:30-7:30 pm at Plymouth YMCA Office

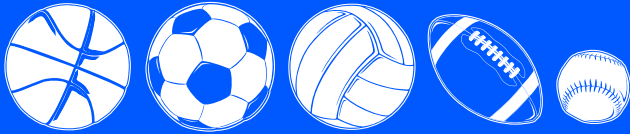
COST OF PROGRAMS:

\$71 Program Members, \$103 Community Members

Y MEMBERSHIP COST:

Individuals \$39 yearly, Families \$59/yearly

HERE TO PLAY



YMCA YOUTH SPORTS

TO REGISTER

Mail Registrations to: Plymouth Family YMCA
248 S. Union Street
Plymouth, MI 48170

Fax Registrations to: 734-453-4191

Register Online at: www.ymcadetroit.org

IMPORTANT INFORMATION

- Girls' volleyball is a joint league between the Plymouth & Livonia YMCAs. · Volleyball is for GIRLS age 9-10 and 11-12. Ages may be combined.
- All Players play equal time throughout the season!
- Leagues are led by volunteer coaches. Please check the form below if you would like to help!
- Players will be contacted by phone after the Coaches Meeting.
- **Players must have a YMCA Reversible Jersey (\$15).** Jerseys are to be picked up at the YMCA office.
- All Coaches **MUST** attend the coaches meeting for rosters, schedules and rules.
- Registrations received after the deadline will be placed on hold and checked for availability.
- All late registrations are charged a \$10 Late Fee.

CALL (734) 453-2904 FOR MORE INFO

NAME _____

ADDRESS _____ CITY _____ ZIP _____

AGE _____ GENDER: M F

BIRTH DATE _____

GRADE _____ SCHOOL _____

AGE: 9-10 11-12

How did you hear about us? _____

Parent/Guardian: I hereby certify the registered participant is of normal health and capable of participating safely in any YMCA program. I hereby grant permission to participate. I agree to hold the YMCA of Metropolitan Detroit harmless should any injury occur during program participation. The YMCA has my permission to publish, for any reason, my child's picture or image taken during YMCA program participation. Furthermore, I understand that the YMCA does not stress competitive play.

SIGNATURE _____

DATE _____

Requests: (Not Guaranteed) _____

Yes, I would like to donate an additional \$ _____ to the Strong Kids Campaign to help children in need in our area.

METHOD OF PAYMENT: VISA MC DISC AE CK CASH

CREDIT CARD #: _____

PARENT NAME _____ BIRTH DATE _____

EMAIL ADDRESS _____

PHONE _____

ALTERNATE PHONE _____

I CAN VOLUNTEER TO:

- Coach
- Assistant Coach
- Be Team Manager

Financial assistance helps ensure everyone belongs at the YMCA.



The YMCA is a United Way Agency.

PROG _____ + MEMBER _____ + JERSEY = TOTAL _____

EXP. DATE: _____ SEC. CODE: _____