

ST. AGNES FALL SPORTS REGISTRATION  
2008 VOLLEYBALL  
GRADES 5<sup>th</sup>-8<sup>th</sup>

PLEASE COMPLETE AND RETURN THIS FORM ALONG WITH A \$60.00 CHECK MADE PAYABLE TO ST. AGNES OR ST. DOMINIC BY **WEDNESDAY MAY 14, 2008**. *Forms will not be accepted without check. Late sign-ups will be placed on teams only if space is available.*

- ❖ Practice begins the week of August 4<sup>th</sup>.
- ❖ All students must have a physical form on file dated after May 1, 2008.
- ❖ (Physical forms can be found on the website under sports)
- ❖ **STUDENTS MAY ONLY PARTICIPATE IN ONE FALL SPORT.**

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VOLLEYBALL- FALL 2008

Child's name: \_\_\_\_\_ Age \_\_\_\_\_ Grade (Fall 08) \_\_\_\_\_

Child's birthdate: \_\_\_\_\_ Sex: \_\_\_\_\_ School:  SAA  SDS

Father's name: \_\_\_\_\_

Father's address: \_\_\_\_\_

Father's Phone: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Mother's name: \_\_\_\_\_

Mother's address: \_\_\_\_\_

Mother's Phone: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Emergency contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship \_\_\_\_\_

UNIFORM SIZE:

SHIRT: YS  YM  YL  Adult (S)  Adult (M)  Adult (L)  Adult(XL)

I would like to coach:  (5<sup>th</sup> & 6<sup>th</sup> grade only)

Phone # (W) \_\_\_\_\_ (H) \_\_\_\_\_

I would like to be a Team Parent:  Phone #(W) \_\_\_\_\_ (H) \_\_\_\_\_

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Parent Signature

Date