



YOUTH VOLLEYBALL

REGISTRATION DEADLINE: FRIDAY, SEPTEMBER 11TH

EVERYONE SHOULD PARTICIPATE!

NRC's scholarship program is available to those currently receiving Free/Reduced School Lunches or that have a current KanCare Insurance Card. Those who qualify for ESP will be able to participate in NRC's ESP Programs at a 50% reduced rate. Note: Must have current school year free/reduced lunch form.



Boys and Girls, grades 3rd-6th (Coed) join together to learn the basic skills of volleyball. Play will consist of two divisions Rookie (3rd/4th) and Pony (5th/6th). Cancellation hotline, standings and schedules will be available online at www.newtonrec.org.

*** Requests are not guaranteed.**



LEAGUE BEGINS: Monday, September 28th

AGE GROUP: 3rd-6th grade, Boys and Girls

NOTE: A \$10 late fee will be charged after the deadline. Late registration does not guarantee a spot on a team. This program is available at a reduced rate for those qualifying. Coaches: Sign your child up for FREE! Fees will be refunded towards the end of the season. For more information contact NRC at 283-7330.

LEAGUE	GRADES	GAMES	FEE	DAYS
Rookie	3rd/4th	6	\$30	Monday
Pony	5th/6th	6	\$30	Monday

YOUTH VOLLEYBALL REGISTRATION FORM

RETURN TO: YOUTH SPORTS; NEWTON RECREATION COMMISSION; 415 N. POPLAR; NEWTON, KS 67114

NAME: _____ ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ EMAIL: _____

PHONE: (H) _____ (W) _____ (C) _____ BIRTHDATE: ____/____/____ AGE: _____

IF YOU WOULD LIKE TO RECEIVE TEXT MESSAGES FOR NRC UPDATES AND CANCELLATIONS PLEASE PROVIDE YOUR CELL PHONE PROVIDER (DATA RATES MAY APPLY): _____

SCHOOL: _____ GRADE: _____ GENDER: M F INTERESTED IN COACHING: Y N
(BACKGROUND SCREEN REQUIRED)
COACHES SHIRT SIZE: AS AM AL AXL A2XL

SHIRT SIZE: YS YM YL AS AM AL PARENT/GUARDIAN NAME: _____

*** Requests are not guaranteed.**

PARTICIPATION WAIVER

We, or I, as parent and/or legal guardians of the participant named above, hereby give consent for my minor child to participate in this program and all other activities incidental thereto, including practice, actual participation, being a spectator thereto, and any incidental travel connected with the activity. I further agree to assume full responsibility in case of any accidental injury incurred while participating in this activity.

The Newton Recreation Commission reserves the right to use photos of NRC participants for promotional purposes. If you have photos of you or your children participating in NRC activities and would like to share them for possible publication in future program guides please bring the photos by the NRC office.

PARENT/GUARDIAN SIGNATURE _____

DATE _____



PARTICIPANT WAIVER:



Participant Name: _____

Activity: _____

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending the Newton Recreation Commission and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the NRC activities and facilities may result from the actions, omissions, or negligence of myself and others, including, but not limited to, NRC employees, volunteers, and program participants and their families. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility.

Parent Signature: _____ Date: _____