YOUTH VOLLEYBALL CLINIC – FALL 2026

MISSING OR ILLEGIBLE INFORMATION WILL DELAY YOUR REGISTRATION

FEE: $25.00 MEMBERS | $75.00 NON-MEMBERS

6 WEEKS OF ONE HOUR VOLLEYBALL GROUP TRAINING SESSIONS

SESSIONS START WEEK OF SEPTEMBER 15TH–OCTOBER 22ND

REGISTRATION DEADLINE: FRIDAY, SEPTEMBER 4TH

CHILD'S NAME: _____

GENDER: _____ **GRADE:** _____ **AGE:** _____

GUARDIAN NAME: _____

PHONE: _____ **EMAIL:** _____ **YMCA Member: Yes ____ No ____**

T – SHIRT SIZE: **YS (6-8)** _____ **YM(10-12)** _____ **YL(14-16)** _____ **AS** _____ **AM** _____ **AL** _____

WOULD YOU OR ANOTHER FAMILY MEMBER LIKE TO VOLUNTEER TO ASSIST OUR CLINIC COACH?

YES:____ NO:____ NAME: _____ **Phone:** _____

WOULD YOU LIKE TO DONATE TO OUR ANNUAL STRONG KIDS CAMPAIGN? YES: ____ AMOUNT $_____ NO: ____