

HOLY SPIRIT JYCO VOLLEYBALL REGISTRATION SPRING 2016

Child's Full Name _____

Grade _____ Sex _____ Birth date _____

School _____ CCD (if applicable) _____

Parents' Names _____

Home Address _____

City _____ ZIP _____ E-mail 1: _____

E-mail 2: _____

Phone(s) Home _____ Work _____

Cell _____

Name of Emergency Contact _____

Relationship _____ Telephone Number(s) _____

List any medical problems, limitations, or other information for child this child

Parent/Guardian Name(s) (Print)

Date

For program INFORMATION, REGISTRATION, and PAYMENT please go to
<http://holyspirtchurch.us/ministries/youth/cyo-sports/>, or contact Holy Spirit
basketball coordinator, Dennis Smolak, at 703-503-5397 or email at dsmol@aol.com

***PLEASE REGISTER ON LINE AT THE ABOVE ADDRESS: The cost per player
is \$110.00. PLEASE - NO PAPER REGISTRATION, IF AT ALL POSSIBLE!
Registration is due by NLT Friday, March 25, 2014. Registrations received after
March 25th will be accepted on a space available basis.**

Print and bring completed Participation Agreement and Medical Form to the
first practice.