



DELHI PARKS & RECREATION
 SPRING YOUTH VOLLEYBALL
 REGISTRATION FORM

I. Please complete the following player information:

_____ MALE - FEMALE _____
 Student's Name Circle One Phone Number

_____ _____ _____
 Street Address City Zip

_____ _____ _____ _____
 Parent's Name Child's Birth Date School Current Grade

II. If you need a reversible jersey, please come to the Parks & Rec. office and you may purchase one for \$10

III. REQUESTS: Due to numerous factors special requests cannot be guaranteed!

A. Would you like to retain last year's coach? ___ YES ___ NO ___ N/A

B. If yes or no please list coaches name: _____

C. THERE IS A LIMIT OF ONE SPECIAL REQUEST. I would like my child to play on the same team at the SAME SCHOOL as: _____

IV. VOLUNTEER COACHING: Volunteer coaches are needed! If you are able to coach, please complete the section below. Also, you need to complete a separate form because we are conducting background checks.

_____ _____ _____ _____
 Name Street Address City Zip

_____ _____
 Daytime phone Email Address

Coaches T-shirt size: S M L XL XXL

Mail form & \$30 check to:
 Delhi Parks & Recreation
 2074 Aurelius Rd.
 Holt, MI 48842

V. I hereby give permission for my child to participate in the above activity:

_____ _____
 Parent Signature Email Address

Must be Postmarked by 2/26