

ST. FRANCIS XAVIER CYO 2016 Fall VOLLEYBALL REGISTRATION

The 2016 St Francis Xavier CYO volleyball season is set to begin the week of August 1st, 2016 and concludes in mid to late October. Practices are held once or twice weekly depending on coach and gym time availability. Athletes must be committed to participate in practice and weekend/day games. No team can be guaranteed games in our gym. Matches are held at various locations in the Akron area. All scheduling is handled by CYO. Please note, in most cases, teams in the sixth, seventh and eighth grade are divided by skill level. New registrants must attach a copy of their birth certificate to this registration. All participants are required to have a physical on file with St Francis and be good for 13 months and include the entire volleyball season. The CYO two page Pre-Participation form with room for Doctors signature can be found at www.stfrancisxavierathletics.com. Athletes will not be able to practice until a physical is on file by August 1st, 2016.

No requests for coaches, practice times or team assignments will be accepted. There must be 8 players to field a team or refunds will be issued. Some grade levels may be combined. Absolutely no refunds issued after August 8th, 2016!

Our parish CYO Fall volleyball program is open to girls in grades 3-8.

All grade school participants must either 1. **be enrolled in St. Francis Xavier School or**
2. **be enrolled in and actively attending a Parish School of Religion program.**

Please visit our website for more eligibility requirements. www.stfrancisxavierathletics.com

To register for volleyball, complete the form below and return by Monday July 25th to:

- **St Francis Xavier Rectory office attention Rhonda McKinnon.**
- **Late registrations will be put on a waiting list.**
- **Parents will be assessed \$30.00 for each jersey top and \$15.00 for shorts damaged or lost.**

Team formations will be decided the week of August 1st. Teams will be formed and coaches will make contact with players by August 5th, 2016. Practice and game schedules TBA

Kim Tuchek, SFX-CYO Athletic Director (kimtuchek@yahoo.com) (330-725-2213)

Use one form per registrant. Please print clearly and fill in all blanks. Make copies if more are needed.

STUDENT'S NAME _____ TELEPHONE NO. _____

PARENTS' NAMES _____

PARENTS' EMAIL ADDRESS _____

ADDRESS _____ CITY/ZIP _____

PARISH _____ SCHOOL _____ PSR Program attending _____

AGE _____ DATE OF BIRTH _____ month-day-year PREVIOUS YRS. IN SFX-CYO _____

Circle Size: Youth Small Youth Medium Youth Large Adult Small Adult Medium Adult Large Adult XL

_____ Birth Certificate Copy Attached - New Player (if not available, must mail to registrar by 08/1/2016)

Girl GRADE 3 4 5 6 7 8

Fee: \$92.00 per child

Make checks payable to **ST. FRANCIS XAVIER CYO.** _____ Check if student is trying out for another VB team

I hereby authorize the directors of the SFX CYO Program to act for me according to their best judgment in an emergency requiring medical attention. I understand that neither St. Francis Xavier Church, School, SFX-CYO directors, nor anyone else associated with the program will assume any responsibility or liability for personal injuries, damages or losses which my child may sustain during the season. Signed by Parent _____ Date _____

Do not write below this line

Date Received _____ Cash _____ Check Number _____ Amount _____

