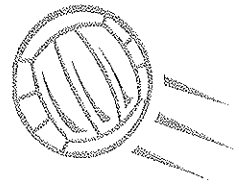


**HOLMES COUNTY PARK DISTRICT
YOUTH BOYS & GIRLS
3RD - 6TH GRADE
VOLLEYBALL
2010**



Practice Schedule:

TBA by Coaches

Game Schedule:

When: Mondays , Tuesdays,
and/or Thursdays

Cost: \$20.00 Make checks payable to Holmes County Park District

Deadline: February 5, 2010 Please add \$5 late fee after deadline.

Questions: 330-674-3353 or hcparks@embarqmail.com

Player's Name: _____ Grade: _____ Gender: _____
 Address: _____ Shirt Size (circle): ys ym yl
 Phone Number: _____ yxl as am al axl
 School: _____
 Parents' Email: _____ (to receive updates on recreation programs)

_____ I am interested in coaching my child's volleyball team
 _____ I am interested in sponsoring a volleyball team (\$95.00)

Waiver

The undersigned hereby releases the Holmes County Park District, West Holmes Local Schools, and East Holmes Local Schools from any liabilities as a result from any injuries that might occur in the youth volleyball program. The undersigned also states that he/she has full knowledge of the activities the participants are involved in and they have adequate health insurance to cover any injury resulting from participation in such activity. By registering, participating in, or attending any HCPD program you agree to publication of any photos taken at any program or event.

Parent/Guardian Signature: _____ Date: _____

**Return Registration Form and \$20 Fee to: Holmes County Park District
 Please add \$5 late fee after deadline. 1 Trail Drive, Suite A
 Millersburg, Ohio 44654**

Deadline: February 5, 2010

Questions please contact the Park District at: 330-674-3353 or hcparks@embarqmail.com