Youth Volleyball Registration Information

Registration: August 1st – October 13th SEASON: October 28th – December 13th COST: Members: \$70 Public: \$90

- Games are played on Tuesday (Grades 2-6) or Thursday (Grades 7-8) evenings.
- All games are held at the YMCA.

Skills Evaluations

(Grades 7-8) Thursday, October 9th, 6 - 7:30 pm (Draft After)

(Grades 9-12) Monday, October 13th, 6 – 7:30 pm (Draft After)

*Players must come to the evaluation to make the team as fair as possible. If you cannot show, you will be put into a pot and randomly drawn

COACHES MEETING: Grades 3-4, 5-6, October 14th @ 6:00 pm

All coaches are required to attend the meeting to coach. The meeting will be in the Community Room. All coaches must participate in child abuse prevention training and fill out paperwork for a background check.

NEW PARENTS' MEETING:

October 14th @ 7:30 pm

To keep the league as fair as possible, players are <u>not guaranteed</u> to be on the same team as last season or follow requests.

PRACTICE- DAYS & TIMES ARE AT THE DISCRETION OF THE COACH

Please be patient. Note that coaches have until October 21st to contact players. Call the YMCA if you have not heard from your coach about a team assignment by that time.

League Starts: October 28th Tournament: December 13th

Volleyball Skills Camp

Date: Monday, March 3rd and Tuesday, March 4th Time: 6 PM - 7:30 PM Members \$25 Non-Members \$35

This camp is for <u>Beginners</u>. It will teach the basics of volleyball, from serving to setting and gameplay.

Randolph-Asheboro YMCA 3-12th Grade Youth Volleyball



Player Registration

Fall 2025

Randolph-Asheboro YMCA

Youth Volleyball Player Information

Players First Name: Last:									
Player Birth Date:	_/	/_		Grade:					
Years Played:	Like	e to m	ove u	p? (Ex	. 6 to	7-8):	Yes	No	
Shirt Size (Circle): YS	S YM	YL	AS	AM	AL	XL	2XL	3XL	
Address:								_	
									
Parent: Phone #:							· · · · · ·		
Parent: Phone #:									
Email: (Please give SPECIAL REQU							hout th	e year)	
PARENT VOLU	JNTE	ER	(Circ	ele)	Coad	ch (
Name:		· · · · · · ·	Pnon	ie:					
Shirt size (if coaching)): S	M	L	XL	2	ΧL	3XL		
By signing, I have th condi			d and			the t	erms	and	
Parent Signature:				Date:					

Please read all this information thoroughly.

If you have questions, you may contact Branson O'Hara (Sports Director)

Email: bohara@asheboroymca.com

Agreement

- 1. I certify that my child is in normal health and capable of safe participation in the Youth Sports & Fitness Programs. I assume all risk(s) and hazards incidental to the conduct of this program and for the transportation to and from the program. Suppose I am unavailable to decide on emergency medical attention at the time of an illness or accident. In that case, I hereby authorize the Randolph-Asheboro YMCA to transport my child to the nearest medical facility for treatment deemed necessary.
- 2. I support the YMCA Youth Sports Philosophy based on "Athletes First, Winning Second" participation, fun physical fitness, skill development, teamwork, fair play, family involvement, and volunteer leadership. I understand that if my child or a family member is disruptive to the referee or other players, they will be asked to leave.
- 3. I understand that the Randolph-Asheboro YMCA has a no-refund policy and that I will not receive a refund for any reason.
- 4. I permit the Randolph-Asheboro YMCA to use photos, film footage, and/or tape recordings of myself or my family for publicity purposes for the following, but not limited to: social media, Promotional Materials, Program Guide, etc.
- 5. We will not provide balls for the practices, but we will have a game ball.

Schedules are available after 10/20 on the website and at the front desk.