2025 Fall Volleyball (August 27th - November 8th)

Girls & Boys 3rd - 8th Grades

Cost: \$125

(+ Membership \$60)

*Membership expires at end of 25-26 School Year



CHANGING LIVES.

Mollenkopf Family Branch

16118 4S Ranch Parkway San Diego, CA 92127 (858) 676-2230

4sranchsports@sdyouth.org www.SDyouth.org

* Return this forn	n to BGC v	vith paym	ent (CC,	Check, Ca	sh) & Me	mbersh	ip Form if p	olayer us not already	∕ a member.
PLAYERS INFO	ORMATIC	N							
Player's Name						Male	Female	<u>Age</u>	Date of Birth
						(C	ircle)		
Parent Email A	ddress					1			
Grade Level	Circ	cle One				Name	of School	<u>ol</u>	
3rd 4	th	5th	6th	7th	8th				
Jersey Size C	ircle One						Yrs of	VB Experience	
YS Y	Μ	YL	YXL	AS	AM	AL			
Played on a Club VB team? Buddy Request. We will do our best to honor a MUTUAL buddy request if possible, but not guaranteed. Must attend Player									
		Yes	No	Assessments ONE buddy re	for any budo				
PARENT INFORM	IATION								
Mother/Guardian N	<u>Name</u>					Phone	<u>#</u>		
Father/Guardian Name						Phone #			
Practices are on	Wed, Thur	s, or Fri fo	or 50-60 m	nin. betwee	n 4:30pm	-8:30pm	(older div	ons have later time	slots). Please list if
	ct in which	they wo	uld NOT b	e able to pi	ractice. L	ist only	ONE confl	ict day and we will d	o our best to
accommodate.									
I WOULD LIKE TO VOLUNTEER AS A COACH? Yes No If yes, please list your name and contact info.									
No experience necessary just enthusiasm and patience. Club Director will be more than happy to help									
teach coaching fur Name	ndementais			Phone #		Fmail A	Address		
Player & Parent Code of Conduct									
I hereby pledge to live up to the Boys & Girls Clubs of Greater San Diego code of conduct. I will remember that youth sports are for Boys & Girls Clubs									
children not for adults and will place the emotional and physical well-being of all players ahead of any personal desire to win. I will lead, by example, in									
demonstrating fair play and sportsmanship to all players. I will encourage good sportsmanship by demonstrating positive support for all players, parents and officials at every game. I promise to treat other players, parents, fans, and officials with respect regardless of race, sex, creed or ability. I understand									
that if I fail to meet any of the pledges mentioned above I may be asked by the Boys & Girls Clubs officials to leave the premises. I will do so and if									
desire make arrangements for a meeting with League Director & Executive Director. I understand that by my signature I am responsible for other									
members of my family that attend any Boys & Girls Clubs Special Events. We are unable to give refunds after August 30th, 2025 (8/30/2025). By signing this form, I as a parent understand and give my child permission to participate in all SPORTS LEAGUE activities. I agree to indemnify or hold									
harmless instructors, sponsors, officials nor employees or directors of the Boys & Girls Clubs of Greater San Diego. I also have read and agree to follow									
the Player & Parent Code of Conduct. I give my consent for emergency first aid by the Boys & Girls Club and for emergency treatment by license									
physician or hospital.									
Parent Signature								Date	
<u> </u>				OFF	ICE USE	ONLY			
Date received				Amount pa			Receipt #	Members	nip #