



Argyle Youth Sports Association

2009 VOLLEYBALL Registration Grades 3-6

www.ArgyleSports.com

Child's Name _____ Grade (Fall 2009) _____

Birthdate (M/D/Y) _____ *** A copy of your child's birth certificate is required.

Parent's Name _____ Home Phone _____

Address _____ Work/Cell _____

Email _____

Registration ends May 29, 2009. Season begins in September.

All AYSA games will be played on Saturdays through the City of Roanoke Youth Volleyball league at the Roanoke Recreation Center. Roanoke Parks and Recreation Youth Volleyball Rules will apply.

Circle Jersey Size:	YS (6-8)	YM (10-12)	YL (14-16)	Adult S	Adult M
Registration Fees:					
Grade 3-6	\$95.00	_____			
Knee pads	\$16.00	_____	Optional, but recommended – junior size		
Have ball from last year					
<u>Deduct 25.00</u>	- (_____)		If your daughter is moving up to 12U this is not applicable - age as of 9/1/09 **		
Total Fees		_____			

** Each girl will receive a Tachikara volleyball to keep and use at practices. 8U & 10U will use the volley-lite balls. 12U will use a regulation standard ball. If you have a volley-lite ball from last year (8U & 10U only), deduct \$25.00 from the registration fee.

Amount enclosed: _____ Make checks payable to: **Argyle Youth Sports Association**
 8079 Steeplechase Circle
 Argyle, TX 76226
 (**include copy of birth certificate)

A late fee of \$10.00 will be charged for registrations received after May 29, 2009.

* AYSA Scholarships are available to allow all girls to participate *

Parent coaches are necessary to make this program work! Please check one.

(Check One) → Coach _____ Asst. Coach _____

I understand this form must be completed and returned to Argyle Youth Sports Association on or before May 29th, 2009 along with full payment. I agree not to hold Argyle Youth Sports Association, its coaches, commissioners, and/or its officers responsible for any injury to my child. Furthermore, I grant permission for a representative of the Argyle Youth Sports Association to seek medical treatment in the case of an emergency to my child.

Signature _____ Relationship _____ Date _____

AYSA Volleyball Commissioner: Karla Hecker (214) 876-7651 khecker@grandecom.net
 This form is also available online at www.ArgyleSports.com.