

1st-7th Grade

FALL YOUTH Volleyball LEAGUE

WHO

BOYS & GIRLS IN 1ST - 7TH GRADE.

WHERE

ALL GAMES & PRACTICES WILL BE HELD AT THE
CAPE GIRARDEAU SPORTSPLEX.

WHEN

PRACTICES ARE HELD ON MONDAYS BEGINNING SEPT. 16
GAMES WILL BE PLAYED ON FRIDAY NIGHTS FROM SEPT. 27-OCT. 18

SIGN UP

THE REGISTRATION COST IS \$60 PER PERSON
AND INCLUDES A T-SHIRT. SIGN UP BY AUG. 30 AT
WWW.CITYOFCAPE.ORG/VOLLEYBALL OR AT THE SPORTSPLEX.

EVALS

A MANDATORY EVALUATION FOR ALL AGES WILL BE HELD ON
SEPT. 9 AT 6:00 P.M. AT THE SPORTSPLEX.

CONTACT

CINDY HENRY | CHENRY@CITYOFCAPE.ORG | 573.339.6341



**CITY of CAPE
GIRARDEAU**
PARKS & RECREATION DEPARTMENT

2526 Jim Drury Way
Cape Girardeau MO 63701
573.339.6341
chenry@cityofcape.org



2019 FALL YOUTH VOLLEYBALL LEAGUE REGISTRATION FORM

REGISTRATION DEADLINE: August 30, 2019
ENTRY FEE: \$60.00 per person (includes t-shirt)
PLAYER EVALUATIONS: A mandatory evaluation will be held for all ages on September 9 at 6PM at the SportsPlex.
CONTACT: Cindy Henry | chenry@cityofcape.org | 573.339.6341

PLAYER'S FORM

First Name _____ **Last Name** _____

Address _____ **City** _____ **State** _____ **Zip** _____

Gender: ☐ **MALE** ☐ **FEMALE** **Date of Birth:** _____ / _____ / _____

Primary Number _____ **Email** _____

Texting Number _____ **Cell Phone Provider (AT&T, Verizon, etc.)** _____

Grade (circle one): **1st** **2nd** **3rd** **4th** **5th** **6th** **7th**

Shirt Size (circle one): **YS (6-8)** **YM (10-12)** **YL (14-16)** **AS** **AM** **AL** **AXL**

School _____

Special Requests _____

Parents Name (Print) _____ **Date** _____

WOULD YOU LIKE TO SPONSOR A TEAM? **YES** **NO**

Sponsor Name _____ **Sponsor Contact** _____

VOLUNTEER COACH'S FORM

Coach's Name _____ **Player's Name** _____ **Age** _____
First MI Last

Address _____ **City/State/Zip** _____

Texting Number _____ **Cell Phone Provider (AT&T, Verizon, etc.)** _____

Home Number _____ **Email** _____

Circle One: ☐ **Head Coach** ☐ **Assistant Coach** ☐ **Either** **Shirt Size** (circle one): **AS** **AM** **AL** **AXL** **2XL** **3XL**

Head Coaches Only:

Do you have an assistant coach (only 1 asst.)? ☐ **Yes** ☐ **No** If yes, assistant coach's name: _____

Assistant Coaches Only:

Do you have a head coach you would like to join? ☐ **Yes** ☐ **No** If yes, head coach's name: _____