



City of Bonner Springs
PARKS AND RECREATION



2020 Fall Youth Volleyball League

Participant Information:

Name of Participant: _____

Date of Birth: _____ Age : _____ Current Grade: _____

Home Phone: _____ Cell Phone: _____

Address: _____ City: _____ Zip: _____

E-Mail Address: _____

(Please check if applicable) I would like my e-mail address to be used for Bonner

Springs Parks and Recreation and city communication.

T-Shirt Size — Youth — S M L (circle one)

Adult — S M L XL XXL (circle one)

Friend Request: _____

Coach Request: _____

Guardian/Emergency Contact: Contact person for league related communication and/or emergency contact.

1. Guardian Name: _____ Phone: _____

Medical

List any medical conditions if any: _____

This does not apply to my child *(check if applicable)*: _____

Waiver and Release

The undersigned, understands that injuries are a natural part of many recreation activities and agrees to indemnify, hold harmless and release the City of Bonner Springs Parks and Recreation (BSPR), their agents and employees from any and all liability for any injury which may be suffered by the above named individual(s) registered in this activity arising out of or in any way connected with participation in this activity. The undersigned and participant authorize the BSPR to use at its discretion any photograph (s) taken of the participants while participating in any activity and waive any and all claims that the participant or the undersigned or their heirs, executors, administrators, or assigns may have or claim to have resulting from such photograph (s) or reproductions thereof. I have read the above statement, understand and agree to the conditions set forth. I agree to abide by all policies and guidelines set forth by the BSPR regarding this program.

Signature _____ Date _____

Parent/Guardian

WELCOME TO THE BSPR GIRLS' VOLLEYBALL LEAGUE PROGRAM!

The goal of the BSPR Girls' Volleyball League focuses on fundamental skills, fun, participation, and social interaction throughout practice and organized games. The BSPR sports programs are designed to provide opportunities and participation to all, regardless of skill or ability. We wish to provide youth with a FUN learning experience and the opportunity to develop lifetime leisure skills.

REGISTRATION INFORMATION

- Sign up at the Community Center: 200 E. 3rd St
- Or register online at www.bonnerrsprings.org
- Registration Deadline: Friday, August 21st
- After Aug. 21st: \$10 late fee

Resident Fees:

First Child: \$45

Second Child: \$42.50

Additional Children: \$40

Non-Resident Fees:

First Child: \$50

Second Child: \$47.50

Additional Children: \$45

PROGRAM INFORMATION

- 2nd-8th Grade
- The BSPR reserves the right to restructure any age division.
- Divisions: 2nd-3rd grade, 4th-5th grade, 6th-8th grade
- Siblings in the same age division will be placed on the same team

PRACTICE AND GAME

TIMES

- 1-2 practices a week starting Monday, September 7th.
- Play at the Community Center & Turner.
- 8 game schedule
- Rainout Line: 816-871-5047

EQUIPMENT

- Must wear knee pads to play
- Jersey provided for gameplay
- Pictures are available for an additional fee

VOLUNTEER COACH

I am interested in coaching my child's team.

Head Coach: Name _____

Asst. Coach: Name _____

Mandatory Coaches Meeting will be held at the Bonner Springs Community Center. Date & time TBD.

As a coach for the BSPR, I realize that I must complete a background check before I will be allowed to coach. *YES (please check)* _____

Will email form to coaches.

Recreation Assistance Program

- Anyone wishing to apply for a scholarship may do so at the BSPR Office.
- Scholarships are only for residents that live within Bonner Springs City Limits.



FOR OFFICE USE ONLY

Payment: (Write Amt.) _____ Cash _____ Check _____ Credit _____
Date: _____ Receipt # _____ Staff Initials _____