

St. Ann Sports Program Enrollment Form

Child's Information

Player's Name: Date of Birth:
Religious Ed: Yes No Grade: Teacher: Room #:
Jersey Size: Jersey #: Choice #1: Choice #2:

Parent's Information

Parent's Name:
Address: City: State: Zip:
Home Phone # Work Phone # Mobile Phone#

Emergency Contact Info (Other than that listed above)

Name: Phone:
Relation to Child:

I/We hereby give our permission for _____ to participate in the St. Ann's Volleyball program. We also waive St. Ann's and their program personnel of any liability for injuries which could possibly occur in the normal course of this program. In doing so, we agree to abide by the rules and regulations of the program.

We agree to pay the participation fee in this sport which is \$_____. We understand that this fee is non-refundable as of 30 days prior to the first game of the volleyball season.

We understand there is a \$25.00 charge for any returned checks, and that our child will not be allowed to enroll in another St. Ann's Sports Program until all fees for their prior participation in a program are paid in full. Spiritwear orders will not be processed until all registration fees are paid in full, and the spiritwear order form with payment have been submitted before the order deadline.

We also agree that we are responsible for the care and maintenance of all uniforms and equipment issued by the sports program and will return this in clean and good condition when required. If any of these items are returned in damaged condition, or not returned, repair or replacement cost will be the responsibility of the parents.

We understand that it is our responsibility to provide transportation for our child's games and practices. This is not provided by the program or the coaches, unless specifically notified.

We understand that it is our responsibility to provide insurance coverage for our child.

Date:

Signature: