

SMCH/SEEKERS WINTER VOLLEYBALL 2012

PLEASE PRINT

PARTICIPATED IN THE SMCH/SEEKERS FALL 2011

NEW PARTICIPANT

PLAYER'S NAME _____ GENDER M F

DATE OF BIRTH : MONTH _____ DAY _____ YEAR _____

GRADE _____ SCHOOL _____

HOME ADDRESS _____ POSTAL CODE _____

HOME PHONE _____ HEALTH CARD # _____

EMAIL _____

T-SHIRT SIZE (ADULT SIZES) - **FOR NEW PARTICIPANTS** S M L XL

PARENTS/GUARDIANS _____ PHONE# _____

_____ PHONE# _____

ALTERNATE EMERGENCY CONTACT

NAME _____ **PHONE#** _____

MEDICAL/ ALLERGY ISSUES OF CONCERN (IF ANY)

MAKE PAYMENT TO- **SMCH VOLLEYBALL PROGRAM**

NEW \$100

FALL PARTICIPANT \$90

SESSION 1 8:30- 9:45 GRADES 1-3 (MAX of 32)

SESSION 2 9:45- 11:00 GRADES 4-6 (MAX 32)

SESSION 3 11:00- 12:15 GRADES 7-8 (Max 32)

PLEASE EMAIL THIS FORM TO RBBLUCIANI@QUICKCLIC.NET. BRING PAYMENT ON FIRST DAY.

Program will be located at 2 locations for the 8 weeks

ST MARK SCHOOL January 14, 21, 28, February 4, 11, 18

POPE JOHN PAUL II SCHOOL February 25 March 3