



4th & 5th Grade Volleyball 2009

Name: _____

Address: _____ City _____

School: _____ Grade: _____

Mother: _____ Phone: _____ (H) _____ (C)

Father: _____ Phone: _____ (H) _____ (C)

Emergency Contact: _____ Phone: _____

Shirt size: Youth M Youth L Adult S Adult M Adult L Adult XL

**Are you willing to coach or assist? _____

Registration and physical skills testing will be **Wednesday, September 9, 2009 at 6:00 p.m. to 7:00 p.m.** in the Sunridge Gym. PHS varsity players will be there for a demonstration and help with fundamental skills. Bring the registration form and \$30.00 (includes t-shirt) that night. Make checks payable to Pendleton Youth Volleyball.

All practices will be held by the respective volunteer coach at their choice of grade schools and on their specified schedule. Games will be every Saturday beginning October 3rd through October 31st at Sunridge Middle School.

Questions??

Call Dianna Anderson 969-4613 or e-mail dianna.anderson@ci.pendleton.or.us