



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

VOLLEY TOTS VOLLEY TIKES WITH LLOYD BALL

4 Week Volleyball Clinic YMCA OF DEKALB COUNTY

Join us for our 4 week Youth Volleyball Clinic instructed by Olympic Gold Medalist Lloyd Ball! Each week kids will learn from the best while improving their skills. Whether this is your first time playing the game or you have experience, there is something for everyone!

- Instructed by Men's Volleyball Gold Medalist Lloyd Ball and other professional players
- Fundamentals and Rules
- Character Value Focused Instruction

AGE: 6-7(Tikes) & 8-10 (Tots)
WHEN: Saturdays, October 7 – October 28
TIME: 2pm-4pm Tikes
2pm-4pm Tots
COST: Members - \$40
Non-Members - \$50



"Commit everything you do to the LORD; Trust him, and he will help you." - Psalm 37:5



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Volley Tikes: 6-7 years old. Boys and girls
Dates: Saturdays, Oct 7-28. 2pm-4pm

Volley Tots: 8-10 years old. Boys and girls
Dates: Saturdays, Oct 7-28. 2pm-4pm

Player's Name _____ Age _____
Date of Birth _____ Grade _____
Parent's Name _____
Mailing Address: _____
City _____ State _____ Zip _____
Phone(____) _____
Email _____
Any health conditions or allergies that instructors should be aware of:

T-Shirt size:
Check the shirt size you'd like

Youth Extra Small (2-4)
 Youth Small (6-8)
 Youth Medium (10-12)
 Youth Large (14-16)

Adult Small
 Adult Medium
 Adult Large
 Adult Extra Large

I, the parent/guardian of the registrant, a minor, will abide by the rules of the YMCA DeKalb County, Inc. Recognizing the possibilities of physical injury associated with sports, I hereby release, discharge and otherwise indemnify the YMCA of DeKalb County, Inc, affiliated organizations and sponsors, their employees, and associated personnel, including owners of fields and facilities utilized for the programs, referees and coaches, against any claim by or on behalf of the registrant and/or parent/guardian as a result of the registrant participation in the program and/or being transported to or from the same, which transportation I hereby authorize. I also state that I am the legal parent/guardian and that there is no one else whose signature is required by law for this release to effect for the registrant's parents/guardians, or anyone associated with the minor or the YMCA DeKalb County or its affiliates.

Parent/Legal Guardian Signature _____ Date _____