

**St. Barnabas Girls Volleyball
2009/2010**

Participant/s Name: _____

Parent/Guardian Name:

Address: _____ Home Phone: _____

Work Phone: _____ Cell Phone: _____

Email: _____

Emergency Contact Name:

Home Phone: _____ Other: _____

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Volunteer Opportunities:

Willing to: Head Coach _____ Asst. Coach _____ Team Parent _____
(assist in scheduling Parental
Concession Requirements)

Grade Level: _____

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Fees: (Please Make Check Payable To St. Barnabas Athletic Board)

4th - 5th - \$120.00 Plus \$10.00 Uniform Fee

6th - 8th - \$120.00 Plus \$30.00 Uniform Fee (Jersey can be used from 6th-8th grade)

**In addition a second check will be required for \$75.00 and returned after
mandatory gym duty assignments have been fulfilled.**

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Uniform Size:

Child Size: Small _____ Medium _____ Large _____ X-Large _____

Adult Size: Small _____ Medium _____ Large _____ X-Large _____

Check# _____ Concession Check# _____