

**BELLBROOK WEE EAGLES  
VOLLEYBALL PROGRAM  
REGISTRATION FORM**

1) PARTICIPANT'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

TELEPHONE \_\_\_\_\_

BIRTH DATE \_\_\_\_\_ GRADE \_\_\_\_\_

2) PARENT/GUARDIAN MOTHER \_\_\_\_\_ TELE# \_\_\_\_\_

FATHER \_\_\_\_\_ TELE# \_\_\_\_\_

3) EMAIL ADDRESS \_\_\_\_\_

4) PARENT PARTICIPATION: ADULT MANAGER \_\_\_\_\_

5) FEE PAID YES NO \$30 CASH CHECK # \_\_\_\_\_

6) SHIRT SIZE: \_\_\_\_\_ (SHIRTS ARE YOUTH M, L and ADULT S, M, L, XL, XXL)

7) HAS PARTICIPANT PLAYED IN THE WEE EAGLE VOLLEYBALL PROGRAM BEFORE?

NO YES # OF SEASONS \_\_\_\_\_

8) Does Child Need to be with other child due to carpooling if yes with whom?

\_\_\_\_\_  
\_\_\_\_\_

9) PARENT/GUARDIAN SIGNATURE \_\_\_\_\_