

Volleyball Coaches...

- If you can't get all of your players parents/guardians to sign the roster form, send this form home with your players and attach the individual forms to the main team roster form.
- **THEN YOU MUST TRANSFER ALL OF THE INFORMATION ONTO THE OFFICIAL ROSTER** (state in the signature area "signature attached").

COMPLETE REGISTRATION FORM BELOW



Mail to: Holmen Park & Recreation Dept., P.O. Box 158, Holmen, WI 54636
or Drop-off at Holmen Village Hall, 421 S. Main St., Holmen (24 Hour Drop Box Available)
 Please make additional copies of this form as needed. Additional forms available at Holmen Village Hall.

Family Last Name: _____ Home Phone: _____ Cell Phone: _____

Address: _____ City: _____ Zip: _____

Parent's/Guardian Names: _____ Emergency Contact (Name/Phone) _____

Email: _____

Resident: _____ Village of Holmen _____ City of La Crosse or Onalaska (HS Volleyball League Only, due to using Central HS and Omni Center)

Non-Resident (circle one): Town of Onalaska Town of Holland Other : _____

HIGH SCHOOL GIRLS VOLLEYBALL LEAGUE



The Holmen Park & Recreation Department will be offering a High School Girls Summer Volleyball League **available to upcoming (fall 2020) 9th—12th graders** with volleyball experience. The league will play on Monday evenings at **Onalaska Omni Center** and **La Crosse Central High School** from 5pm-10pm. Three levels of play available: GOLD Division (Varsity players/teams), SILVER Division (JV players/teams), or BRONZE Division (9th graders only). Each team must have an adult coach/manager (18 or older).



TEAM REGISTRATION ONLY! SUBMIT THIS FORM TO YOUR COACH.

Registration deadline: Wed., May 6, 2020 (TEAM REGISTRATION ONLY)

Open To: Girls, entering grades 9-12, in the fall of 2020
League Games: Mondays, June 15 - July 27, 2020

Player Fee: \$20 per person

For more information and to pick up a registration form, stop by the Holmen Village Hall or <http://www.holmenwi.com/holmenpr> or call (608) 526-2152.

HS VB COACHES/MANAGERS...YOU MUST TRANSFER ALL OF THIS INFORMATION ONTO THE OFFICIAL TEAM ROSTER

Participant's Name First, Last	M/F	Date of Birth	Age	Grade Fall of 2020	Program Title, Team Name, Division	School	Shirt Size	Misc. Information (Medical, requests, etc.)	Program Fee



Shirt Sizes: AS (adult small), AM (adult medium), AL (adult large), AXL (adult extra large), XXL (adult double extra large)

Total Fees \$

Other \$

Total Amount \$

**Make Check Payable To:
Holmen Park & Recreation**

SIGNATURE OF A PARENT OR LEGAL GUARDIAN ARE REQUIRED FOR YOUTH REGISTRATIONS.
ALL ADULT PARTICIPANTS MUST SIGN BELOW FOR ADULT PROGRAMS.

I hereby understand that my son, daughter, or self is registering to participate in the programs stated on this sheet, sponsored by the Village of Holmen. In addition, I understand that this program, like all physical activity, has some inherent risk involved. Furthermore, my son, daughter or self is in good physical condition appropriate for the stated activity and that participants must assume full responsibility for injuries incurred while taking part in these programs. No accident insurance is provided through the Village of Holmen. A doctor's release may be required after a serious illness, injury, or hospitalization before returning to the program.

Parent or Guardian Signature _____ Date _____

Registrations must be filled out completely with payment or they will be returned.