

VOLLEYBALL



Physical on File:
Yes or No

2021-2022 Athletics Registration

Player's Name: _____

Date of Birth: _____ Grade Level: _____ Player's Short Size: _____

Player's Jersey Shirt Size: _____ Top 3 Jersey #'s: _____

Home Address: _____

City: _____ Zip: _____

Cost: \$100 * ACH on FILE CASH CREDIT CHECK

Parent's Name: _____

Parent's Email: _____

Parent's Cell: _____

DISCLAIMER

I am the parent or guardian of the named participant in the GCA Athletic Program. I hereby give my approval to the participant in the scheduled activities of GCA Athletics. I also assume all the risks and hazards to incidental contact or injuries and transportation. GCA Athletics is not responsible for any incidental hazard of any kind.

Signature: _____ Date: _____

Print Name: _____ GCA Staff Signature: _____