

# 2019 CASA VOLLEYBALL APPLICATION

## 4<sup>th</sup>, 5<sup>th</sup> and 6<sup>th</sup> Grade Girls

Applicants Must Attend CADILLAC AREA PUBLIC SCHOOLS or Live in the CAPS SCHOOL DISTRICT.  
**Registration Fee is non-refundable.**

The girls will meet in the **High School Performance Gym** on the dates and times listed below. Time will be spent developing volleyball skills and playing games. Girls will be divided into different groups every Saturday. Please check the [casasports.org](http://casasports.org) website or “CASA Sports Cadillac” Facebook page for cancellations due to weather. We are also setting up a “Remind” account to notify parents. All you need to do is send a text to 81010 with the message @8298ae to sign up. It’s confidential. We will not notify you after you sign up. Girls should come ready to play, in gym class attire on February 9th.

**2019 Volleyball Dates& Times:** February 9, 10:00-12:00 (No CASA on February 16<sup>th</sup>)  
February 23, 10:00-12:00  
March 2, 10:00-12:00  
March 9, 10:00-12:00  
March 16, 10:00-12:00

**Registration Fee of \$30 Must Be Sent With Application.** Family Discount Plan is \$5.00 off each additional child. Please fill out one application per child. Fee waivers are no longer accepted. Late applications may not receive a t-shirt. For more information, please go to [www.casasports.org](http://www.casasports.org).

Check# \_\_\_\_\_ Amount \$ \_\_\_\_\_ School \_\_\_\_\_

**PLAYER’S NAME:** \_\_\_\_\_ (Last) \_\_\_\_\_ (First)

**Date of Birth:** \_\_\_ / \_\_\_ / \_\_\_ **Age:** \_\_\_ **Current Grade:** \_\_\_\_\_ **School:** \_\_\_\_\_

Preferred Shirt Size: **Youth Size:** L **Adult Size:** S M L XL

**Address:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

### APPROVAL OF PARENTS OR GUARDIANS

I/We, the parent(s) or guardian(s) of the above applicant do hereby give my/our consent for this student to participate in the CASA Volleyball Program under the above conditions. I/We will not hold CASA, its sponsors, supporters, officers, directors, coaches teams, or anyone connected with the activity, responsible for any claim including but not limited to injury, which the above applicant may incur while participating in this program. I/We promise that I/We will save such persons harmless from all claims which may be made against one or more of them arising from any claim, including but not limited to injury, which the above applicant may incur while participating in this CASA Program, and I/We realize that CASA relies on my/our above promise in accepting the above applicant in the CASA Program.

\_\_\_\_\_  
(Parent or Guardian’s Signature)

\_\_\_\_\_  
(Parent or Guardian’s Name - printed)

Applications are due by February 1st

**Mail Applications & Donations to: CASA, P.O. Box 308, Cadillac, MI 49601 [www.casasports.org](http://www.casasports.org)**