4-H Volleyball Registration Form

Please complete and return with payment to:

Extension Clark County

517 Court Street, Room 104

Neillsville, WI 54456

Email: ClarkCounty4H@co.clark.wi.us Fax: 715-743-5129

Questions: 715-743-5121

Chairs: Brittney Lowry

Make the $20 non-refundable check payable to: **4-H Leaders Federation**

**A roster must be completed for each team.**

No additions to rosters allowed after March 17th.

**DUE MARCH 17th**

Volleyball Game Days:

April 6th & 7th

Neillsville High School



4-H Club

We will have the following number of teams: \_\_\_\_\_ A team(s) \_\_\_\_\_ B team(s) \_\_\_\_\_ C team(s)

You agree to the following guidelines (please initial each item):

\_\_\_ Each player will wear appropriate foot attire

\_\_\_ Modest sporting event attire will be worn by all players, coaches, and spectators for my team(s)

\_\_\_ Manners will be used throughout the competition

\_\_\_ Referees are human; my teams and I will do our best to respect the play calling during each match

\_\_\_ We will provide a line judge for each match (over the age of 16)

\_\_\_ One or two members will cover the scoreboard after each game OR we will ask the scoreboard attendant(s) if they want to rotate out

\_\_\_ We will double check our seating area and pick up any trash my team, club, or others may have left behind and place it in the proper receptacle

\_\_\_ I understand that if my team places first or second in this tournament we will be required to stay and help clean the facility prior to our departure

**A LEAGUE (12 and older)**

|  |  |
| --- | --- |
| Coach (1):  | Coach (2): |
| Address: | Address: |
| Phone(s): | Phone(s): |
| Email: | Email: |

|  |  |  |
| --- | --- | --- |
| A Team (one) | A Team (two) | A Team (three) |
| 1 | 1 | 1 |
| 2 | 2 | 2 |
| 3 | 3 | 3 |
| 4 | 4 | 4 |
| 5 | 5 | 5 |
| 6 | 6 | 6 |
| 7 | 7 | 7 |
| 8 | 8 | 8 |
| 9 | 9 | 9 |

**B LEAGUE (13 and younger)**

|  |  |
| --- | --- |
| Coach (1):  | Coach (2): |
| Address: | Address: |
| Phone(s): | Phone(s): |
| Email: | Email: |

|  |  |  |
| --- | --- | --- |
| B Team (one) | B Team (two) | B Team (three) |
| 1 | 1 | 1 |
| 2 | 2 | 2 |
| 3 | 3 | 3 |
| 4 | 4 | 4 |
| 5 | 5 | 5 |
| 6 | 6 | 6 |
| 7 | 7 | 7 |
| 8 | 8 | 8 |
| 9 | 9 | 9 |

**C LEAGUE (5-10)**

|  |  |
| --- | --- |
| Coach (1):  | Coach (2): |
| Address: | Address: |
| Phone(s): | Phone(s): |
| Email: | Email: |

|  |  |  |
| --- | --- | --- |
| C Team (one) | C Team (two) | C Team (three) |
| 1 | 1 | 1 |
| 2 | 2 | 2 |
| 3 | 3 | 3 |
| 4 | 4 | 4 |
| 5 | 5 | 5 |
| 6 | 6 | 6 |
| 7 | 7 | 7 |
| 8 | 8 | 8 |
| 9 | 9 | 9 |

**Referees Needed**

Do you know any youth who would be able to referee on Saturday, March 25th or Sunday, March 26th?

They would be paid $5 for each game. Please list referee suggestions with contact information below:

 Name Days Available Contact Information

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_