



# Application for Youth Training 2007

www.centralohiovbc.com

PLEASE PRINT ALL INFORMATION

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE & ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

*Area Code*

PARTICIPANT'S  
SIGNATURE: \_\_\_\_\_

### PERMISSION FOR PARTICIPANTS UNDER 18 YEARS OF AGE

As parent/guardian of \_\_\_\_\_, I give my permission for her to participate in the Central Ohio Volleyball Club's Youth Training Program.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### AGE GROUP - CHECK ONE

8 9 10 11 12 13 14

The Central Ohio Volleyball Club's Youth Training Program will be held once a week from April 21st through May 12th, 2007 at the Sports Barn at Easton facility. The program will include one session each Saturday from 10am to Noon. Each session will be two hours in length for a total of eight hours for the session. Training will be specialized in the individual skills of volleyball and not team concepts.

The cost for the program is \$80.00. Send this application and payment to:  
COVBC Youth Training  
P.O. Box 861  
Washington CH, OH 43160

The Central Ohio VBC reserves the right to cancel this program if sufficient participants are not registered.

*Central Ohio VBC Use Only*

**Registration and Payment  
Received**

**CHECK**

**CASH**

04/07