



# J O Volleyball

in partnership with Blanding City

## 2024 Youth Volleyball Registration **For Grades 5, 6, 7 & 8**

Participants will be placed on a team according to their skill level

This will be organized and operated by **J O Volleyball** for info contact:

Cheyne Palmer 435-459-9171, Skyann Palmer 435-459-9561 or David Palmer 435-678-9977

**MANDATORY PARENT MEETING at The San Juan Wellness Center January 25th @ 8pm**

**Participation Fee: \$100**

If you already have the current uniform then registration is \$60 (see attached info)

**Deadline: Wednesday, January 31st 2024**

**Name:** \_\_\_\_\_

**Ph.#:** \_\_\_\_\_

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

**Grade:** \_\_\_\_\_

**Jersey Size (fits chest measuring): 2XS (28"-30") XS (30.5"-32.5") Small (33.5"-35") Medium (35.5"-38")**

**Large (38.5"-41")**

**XL (41.5"-43.5")**

**2XL (44"-46")**

**3XL (46.5"-48")**

In consideration of being allowed to participate in any way in the J O Volleyball and or City of Blanding Athletics/Sports and related events and activities the undersigned:

1. Agree that prior to participation, they will inspect the facilities and equipment to be used, and if they believe anything is unsafe, they will immediately advise the supervising authority of such conditions and refuse to participate. Agree that the parents or legal guardians will instruct the minor participant that prior to participating, he or she should inspect the facilities and equipment to be used, and if the participants believe anything is unsafe, they will immediately advise the supervising authority of such conditions.
2. Acknowledge and fully understand that each participant will be engaging in activities that involve risk or serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions or negligence of others, the rules of play, or the conditions of the premises or of any equipment used. Further, there may be other risks not known to us or reasonably foreseeable at this time.
3. Assume all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.
4. Photos may be taken of you or your child while participating in City sponsored activities to be used for advertisement or a way to promote and or congratulate etc. If you are opposed to your participant being in said photos please make the Blanding City Recreation Director aware in writing.
5. Intending to be legally bound, do hereby release, waive, discharge and covenant not to sue the City of Blanding, J O Volleyball or their affiliated organizations, their respective administrators, officers, directors, agents, coaches and other employees or volunteers of the organization, other participants, sponsoring agencies, sponsors, advertisers, and if applicable owners and lessors of premises used to conduct the event, all of which are hereinafter referred to as "releasee" from any and all liability to each of the undersigned, his or her heirs and next of kin for any claims, demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in while or in part by the negligence of the releasee or otherwise in connection with association or entry in and/or arising out of traveling to, participating in and returning from participation in programs.
6. In the event that a participant sustains injury while participating in City of Blanding or J O Volleyball programs, I hereby authorize any emergency first aid, medication, medical treatment or surgery deemed necessary by licensed medical personnel. I also give my permission for attending medical personnel to execute on my behalf permission forms or other necessary medical documents and to act on my behalf if I am not immediately available to do so.
7. Further, I understand the City of Blanding or J O Volleyball does not provide accidental medical insurance coverage for participants while engaged in sponsored recreation programs. Securing appropriate medical insurance coverage is the responsibility of the participant.

**Parent/Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

\_\_\_\_\_ **YES! I will coach my child's team. Shirt size for Coach?** \_\_\_\_\_

**Name;** \_\_\_\_\_

**contact info:** \_\_\_\_\_

# **J O VOLLEYBALL**

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## **Parents Code of Conduct**

I hereby pledge to provide positive support, care, and encouragement for my child participating in youth sports by following this Parents Code of Conduct.

- I will encourage good sportsmanship by demonstrating positive support for all players, coaches, and officials at every game, practice or other youth sports events.
- I will place the emotional and physical well being of my child and other participants ahead of my personal desire to win.
- I will do my best to make sure that my child is at every practice, and if I'm not sure when it is, it is just as much my responsibility as the Coach's to find out when practice is.
- I will insist that my child play in a safe and healthy environment.
- I will support coaches and officials working with my child, in order to encourage a positive and enjoyable experience for all.
- I will demand a sports environment for my child that is free from drugs, tobacco, and alcohol and will refrain from their use at all youth sports events.
- I will remember that the game is for youth – not adults.
- I will do my very best to make youth sports fun for my child.
- If I have concerns about coaches, officials etc. I agree to discuss with the coach or program director in an appropriate way and not in a disrespectful manner.
- I will ask my child to treat other players, coaches, fans and officials with respect regardless of race, sex, creed, or ability.
- I will help my child enjoy the youth sports experience by doing whatever I can, such as being a respectful fan, assisting with coaching, or providing transportation.
- I understand that if I don't live up to this Code of Conduct I will be asked to leave the premises/game. At the Program Directors discretion, I may not be allowed back for the entire season or longer.

Date: \_\_\_\_\_

\_\_\_\_\_  
**Print** Parent,Guardian

\_\_\_\_\_  
**Signature**

## **– Current Uniform –**

**This is the uniform that we are using this year  
only it does not say SHARKS  
but instead it says “San Juan Riot”  
If you already have one then you do not need to purchase one.**

