

# SCCS Knights 2011-2012 Volleyball Registration Form



SCCS will form volleyball teams for 5<sup>th</sup>, 6<sup>th</sup>, 7<sup>th</sup>, and 8<sup>th</sup> grade girls if there is interest from students and parents. These teams will be a part of the Catholic Athletic Association (CAA). Matches will be with other Catholic school teams both at SCCS and at other Catholic schools.

Practices will begin the first full week of September with typically two practices per week. Times and days will depend on availability of coaches and the gym.

Matches will be scheduled by the CAA once all teams are formed and registered. The CAA typically communicates the match schedule to coaches by the second week of practice with matches beginning mid to end of Sept.

Cost for volleyball is \$75.00. Payment must accompany this registration form. For anyone in financial need, please do not hesitate to call the school office for assistance. Questions regarding the volleyball program should be directed to John Kolnik, SCCS Athletic Director, [jkolnik@stccs.com](mailto:jkolnik@stccs.com) or 651 439-5581, ext. 333.

**REGISTRATION DUE to SCCS by August 26, 2011. Registrations must be received by this date so teams can be formed. Any registrations received after this date may not be eligible for a team.**

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Name \_\_\_\_\_ Grade \_\_\_\_\_ Advisory Teacher \_\_\_\_\_

Father's Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
E-mail Address \_\_\_\_\_

Mother's Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
E-mail Address \_\_\_\_\_

Street/City/State/Zip \_\_\_\_\_

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Parents: Your volunteer time and talent is critical to the success of our athletic programs. Please consider volunteering for one of the following roles. Thank you and may God richly reward you with His blessings.

COACH

ASSISTANT COACH

TEAM MANAGER

Name \_\_\_\_\_ Grade \_\_\_\_\_

VOLLEYBALL