

2022-23 NB CSL VOLLEYBALL REGISTRATION

5th – 8th grade GIRLS / 5/6th BOYS & 7/8th BOYS

Your school participates in the North Bay Catholic Schools Athletic League.
The NB CSL consists of 12 Catholic & Private schools in the Counties of Sonoma, Napa & Mendocino.
We are NOT affiliated with CYO.

THIS IS YOUR SCHOOL TEAM which plays in the NB CSL.

REGISTRATION FEE is DUE with form. A refund will be issued if your team folds or the league doesn't get enough teams to play.

BOYS – Boys teams are combined, 5/6th and 7/8th

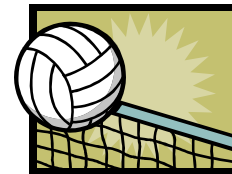
GIRLS 1 team per grade / combined teams allowed if not enough in one grade

- **League games:** BEGIN Saturday, August 27th Game days are: Saturdays & Monday nights
- **Season will end:** Early – mid-October
- Practices may begin starting August 1st, 2022
- Practice schedule dates, times and location – TBD

COACHING: Our teams are coached by volunteer parents. Each team needs 2 co-coaches.
If you are interested in coaching, please contact your school athletic director as soon as possible.
Coaches who represent the NB CSL are required to follow and adhere to the NB CSL Coaches Code of Conduct, NB CSL Coaches Handbook, be a registered volunteer, and may be asked to attend a coaches meeting held by your athletic director.

Any questions, please contact **Athletic Director Katie Ford at 354-0805 or akajrford@att.net**

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DUE BY MAY 23, 2022 (1 student per form)

***FEE DUE with registration form: \$85 per athlete**

Payable to St. Mary's

*Refund will be given if the league does not field enough teams.

PRINT LEGIBLY - ALL FIELDS must be completed

PRINT Athlete Name _____ **22-23 Grade:** _____

Home Address: _____ **City** _____ **Zip** _____

PARENT/ GUARDIAN NAME: PRINT _____

PARENT/GUARDIAN EMAIL: _____

REQUIREMENTS for participation:

- It is **recommended** that all participants have an athletic physical prior to participating in any athletic program
- Student Athletes will be required to sign the ***Responsible Athlete Contract** prior to the start of the season.
- Parents may be required to attend a mandatory pre-season parent meeting and sign the ***Responsible Athletic Parent Contract**. (* Your Athletic Director will provide this information.)

MEDICAL RELEASE

I, we, hereby authorize the staff of the NB CSL after-school athletic program and its representative to consent to any emergency medical or surgical care which may be needed and deemed necessary for my son/ daughter while under their supervision. I have no knowledge of any physical impairment that would affect the above student athletes' participation in any rigorous physical activity. I understand that it is my responsibility to notify the athletic director & coach of any medical condition, which may affect my child. I understand that a reasonable attempt will be made to contact me before use of this consent.

I/We, the parent/guardian recognize that there are certain inherent risks associated with my child participating in any sports program. I/We, hereby freely and voluntarily, without duress, accept the assumption of risk, and understand and agree to assume all of the risks, and accept sole responsibility for any harm to my child.

I/We the parents of the above named participant understand that the member schools, the CSL, and its representatives will attempt to provide reasonable supervision for our child. However, we understand that injuries can occur. These injuries can, on rare occasion, result in total disability, paralysis or death. In consideration for providing my child the opportunity to play this chosen sport, we hereby release and save harmless the member schools, its employees and volunteers from any liability for any injury that my child may sustain while participating as a member of a NB CSL team.

DATE _____ Parent / Guardian name (please print) _____ SIGNATURE of PARENT _____

FOR EMERGENCY CONTACT:

PRINT MOM / GUARDIAN NAME _____ CELL PHONE MOM _____

PRINT DAD / GUARDIAN NAME _____ CELL PHONE DAD _____

Any medical condition, such as asthma or medications, such as inhalers, your child may have or need to use, must be brought to the attention of your child's' coach. Any medications must be in a sealed zip-lock bag, with child's name, with written instructions on use and giving permission to your child's' coach to administer.