



RICHMOND PARKS & RECREATION

Youth Volleyball League (3rd grade-6th grade)

Registration Fee: 1 child-\$75.00

(each additional child-\$70.00)

Games start end of September/October. Games will be played in Richmond, Lexington, Odessa, Higginsville, Oak Grove, Lone Jack and/or other towns.

Games will be scheduled for Saturdays.

Coaches will have more information about practice days/times after 9/1/26.

REGISTRATION DEADLINE: August 28, 2026

Late entry forms will be accepted until teams are full after deadline.

Late entry fee (after registration deadline): an additional \$15.00/ child (no multi-child discount)

Please mark which division the participant should be in.

● **3rd/4th grade** _____ ● **5th grade** _____ ● **6th grade** _____

- *The participant's grade is based on the 2026-2027 school year*
- *Divisions might be changed or combined if needed*

Child's Name _____ Date of Birth ____/____/____

Child's age as of 8/30/26: ____ Grade (based on the 2026-2027 school year) ____ Shirt size YS YM YL AS AM AL AXL AXXL

Parent/ Guardian Name _____ E-mail address _____

Address _____ City _____ Zip Code _____

Cell Phone _____ Cell Phone _____ Work Phone _____

Emergency Contact _____ Phone _____ Relationship _____

Health concerns of participant the Parks & Recreation Department/coach should be aware of: _____

I am interested in volunteering as: Head Coach: _____ Shirt Size: AS AM AL AXL 2XL 3XL

Head coach picks one assistant coach: _____ Shirt Size: AS AM AL AXL 2XL 3XL

If you are selected to be a coach, the Parks & Recreation department will contact you on or before: 8/31/26

Drafts & Coaches meeting will be in the City Gym (205 Summit Street) September 1, 2026. Time TBA.

I, the participant or the guardian of the below named candidate for a position on a Parks & Recreation team, hereby give my approval to participate in any and all recreation activities, including transportation to and from the activities. I know that participation in sports may result in serious injuries and protective equipment does not prevent all injuries to players, and to hereby waive, release, absolve, indemnify and agree to hold harmless the Richmond Parks & Recreation Department, City of Richmond, the organizers, sponsors, supervisors, officials participants and persons transporting myself or my child to and from activities for any claim arising out of any injury to myself or my child whether the result of negligence or for any other cause. I agree to return equipment issued in as good condition as when received, except for normal wear and tear. **In addition, I agree, understand, and allow the City of Richmond to take and use my or my child's photograph, likeness, name, statement, or video. I understand that the City of Richmond may use the photograph, likeness, name, statement or video for the purposes of publication, presentation, websites, and social media channels.** I have read and fully understand the above program details and waive and release all claims including damaged, stolen, or lost property that could occur during the recreation program.

I agree to abide by the rules and regulations as set forth by the Richmond Parks & Recreation Department, for my child (myself, and our family's participation) in the program. I understand that this includes, but is not limited to, good sportsmanship toward the officials, coaches, and opposing players and their coaches and fans. **FAILURE TO DO SO MAY RESULT IN EXPULSION FROM THE GYM FOR REMAINDER OF GAME AND ALL FUTURE GAMES.**

I am aware that The Richmond Parks & Recreation Department reserves the right to cancel, combine or divide classes or programs; to change the time, date, fee, age divisions, or place of meeting or to make necessary revisions in any program when necessary.

If a "special request" is made, the Richmond Parks & Recreation Department cannot guarantee that the request will happen. Our teams are selected by the coaches through a draft. If you have a "special request" (such as you want your child to be on a certain team, with a certain coach, not with a certain coach, or on the same team as another participant) please write your request here: _____

Coaches will see your request. Again, we will try our best to follow through with your request, but it is not guaranteed. Siblings or others living in the same household will be placed on the same team. **Once a participant is placed on a team they will not be switched.** No Refunds. **Signing below means you are aware this is a game for the KIDS to have FUN and that you have read and agree with the above.**

Parent/Guardian Signature _____ Date _____

Please return to the City Collector's Office, 205 Summit, Richmond, MO 64085. Make checks payable to: City Of Richmond
City Hall Hours: M-F 8:00am-4:30pm. If after 4.30pm, you may put this form/money in the "After Hours" box outside of City Hall.

QUESTIONS? Please e-mail: hwilliams@cityofrichmondmo.org

Don't forget to sign-up for Richmond Alert--important Richmond Parks & Recreation information will be sent as a text message directly to your cell phone. Sign-up at: www.cityofrichmondmo.org

Office Use Only

Amount Paid \$ _____

Date Recorded _____

By: _____