

**V  
O  
L  
L  
E  
Y  
B  
A  
L  
L**

**Volleyball**



**Session #1 Dates: 3/4/24 - 4/22/24**

**When: Mondays**

**Time: 7:00PM-9:00PM**

**Location: Spring Grove Intermediate School Gym**

**Fee:**

**\$50/\$45 PR Discount (8 week Sessions)**

***PR Discount: Residents of SG Borough, Paradise Township, Jackson Twp.***

**Instructor: Diane Bahn**

**Power Volleyball played at a challenging pace, players must have experience playing at a more advanced level or for an organized team.**

***\* Preregistration is required -Limited Space!***

***\*NO "DROP INS" ALLOWED***

***Online registration is available on our website at [www.sgrprc.com](http://www.sgrprc.com)***

**Volleyball Registration Spring 2023 (Mondays)**

Cut along line and return form with payment to enroll in class session. Any questions may be directed to 717-225-9733 Ext. 3  
Checks should be made payable to SGRPRC and sent to PO Box 349 Spring Grove Pa 17362

Please PRINT Clearly

Name: \_\_\_\_\_ Borough/Township Residing: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Work/Cell Phone: \_\_\_\_\_

Age: \_\_\_\_\_ Gender: M or F Email: \_\_\_\_\_

I fully understand and accept the risks involved in participating in any strenuous activity and I absolve the Spring Grove Regional Parks and Recreation Center from all liability for any personal injury incurred through my participation in any Spring Grove Regional Parks and Recreation Center sponsored education and/or physical activity program.

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

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_  
(Only if registrant is under 18 years of age)

Office Use:  
PAID: \_\_\_\_\_ Type/Amount: \_\_\_\_\_ Date: \_\_\_\_\_

