



NORTHWEST OHIO JUNIORS VOLLEYBALL LEAGUE 2019 FALL



GLASS CITY ATHLETICS IS PROUD TO BE CELEBRATING 25 YEARS SERVING THE COMMUNITY!

This Fall if you would like to learn or improve your volleyball skills, be part of the Glass City Northwest Ohio Juniors Volleyball League. The Northwest Ohio Juniors League is a great program to utilize to continue to improve your players' skills. This league is a low-cost option for players and families who do not want to travel for competitions. Glass City offers outstanding coaching! Included in your fees are: six league nights (two games per night), one team practice per week through the season and one skill enhancement practice through the season.

The league will have two divisions: (4th/5th/6th) and (7th/8th). Cost for the league is \$425 per player and uniforms are included.

TO SECURE YOUR SPOT IN THE LEAGUE:

1) Send in the sign-up form below and mail in your \$250 deposit to secure your spot.

2) Come to the Placement Practice:

Date: Thursday, August 15

Time: 6 - 7:30 p.m.

Location: The Paragon, 1590 Albon Road, Suite 12 Holland, Ohio 43528

If you have not paid your deposit, bring a deposit check for \$250 per player to secure your spot on the team.

3) Mark your calendar for practice and competition dates.

Practice dates: Team practices begin the week of 8/19. Skill enhancement practices begin the week of 8/26.

Times are TBD. All practices will take place at the Paragon.

League Play Dates: Mondays: 9/9, 9/16, 9/23, 9/30, 10/7 and 10/14

League Play Location: TVC Lucas County Rec Center. Hall #1. Times TBD.

Register online at www.glasscityathletics.com or return the sign-up form by mail by Tuesday, August 13, 6 p.m.

For more information contact Dana Hooper:

☎ 419-261-0067 ✉ dahooper@roadrunner.com 🌐 www.glasscityathletics.com 🏠 The Paragon, Suite 12
1590 Albon Rd Holland, OH 43528

FALL 2019 NORTHWEST OHIO JRS. VOLLEYBALL LEAGUE SIGN-UP FORM

Player's Name: _____ Date of Birth: _____

Player's Grade (as of Fall 2019): _____ School: _____

Address, City, State, ZIP: _____

Player's T-Shirt Size (please circle): YM YL AS AM AL AXL

Parent's Names: _____

Parent's Cell Phone: _____ Parent's Email: _____

Amount Enclosed (please make checks payable to Glass City Athletics): _____

 Please mail form and \$250 deposit to: Glass City Athletics The Paragon, Suite 12 1590 Albon Rd Holland, OH 43528
You can also register online at www.glasscityathletics.com. Registration closes Tuesday, August 13, 6 p.m.