

**WOODSTOCK RECREATION COMMISSION
2017-2018 SEASON**



**CO-ED ADULT VOLLEYBALL
REGISTRATION FORM
\$10 pp (Annual Fee)**

**Monday Evenings: 7:30pm--10:30pm @ Woodstock Academy
South Campus Gym (NEW LOCATION)**

GYM CLOSED HOLIDAYS

- **September 11, 2017 – November 27, 2017**
- **April 2, 2018 – June 11, 2018**

Name: _____ **Phone:** _____

Address: _____ **Email:** _____

Are there any medical conditions that would prevent you from participating in this program that the Woodstock Recreation Commission should be aware of? Y/N If yes, please explain: _____

Disclaimer: I, _____, will not hold the Town of Woodstock, Woodstock Recreation Commission, including its representatives liable for any injury sustained by me while participating in the Co-Ed Adult Volleyball Program sponsored by Woodstock Recreation Commission.

Signature: _____ **Date:** _____

Must be 18 years old & up to participate!

Form and payment of \$10.00 pp must be submitted to WRC, 215 Coatney Hill Rd, Woodstock, CT 06281 or submitted to Brian Miskell before participating in the program. Please contact the Woodstock Recreation Department at 860-315-5175 or recreationdirector@woodstockct.gov for information.