



2026 OLSS SPRING VOLLEYBALL PROGRAM REGISTRATION

For OLSS students in grades 6-8

Your permission as a parent or guardian is required for your child to be allowed to participate in our volleyball program. While we do not require your child to have a physical examination in order to participate, we strongly suggest that he/she have one. Your child will be required to wear proper athletic shoes and clothing during practice. School uniforms and dress shoes are not permitted.

I hereby give my consent for *(child's name)* _____ to participate in the Spring 2026 volleyball program at OLSS.

I authorize OLSS to obtain, through a physician of its own choice, any emergency medical care that may be reasonable and necessary for my child during the course of such activities.

I also understand that my child must be: (a) covered by a family medical insurance policy, or (b) if no medical insurance policy is listed, would also consent by signature below to pay in full, the dollar amount of any such emergency care as described above and not hold any individual or organization associated with OLSS or its volleyball program financially responsible for such care.

Student's Birth Date: _____ Current grade: _____

Mother/Guardian Name: _____ Cell Phone: _____

Mother's Email Address: _____

Father/Guardian Name: _____ Cell Phone: _____

Father's Email Address: _____

Allergies/Medical Conditions: _____

Parent/Guardian Signature _____ Date: _____

The registration fee is **\$35 per child** and may be paid by:

- Cash (school office)
- Check made out to OLSS
- Charge my FACTS account

REGISTRATION FORMS & PAYMENTS ARE DUE BY February 25, 2026.

Please contact Gladys Nehf, Athletic Program Director at 4nehf@comcast.net with any questions.