



NORWALK PARKS & RECREATION
100 Republic Street (419) 663-6775 www.norwalkrec.com

YOUTH VOLLEYBALL – Spring 2025

*** PROGRAM INFORMATION SUBJECT TO CHANGE AT ANY TIME ***

Boys & Girls (1 – 2nd Grade)

- 5 Instructional Clinics
- Sat AM starting March 1

Boys & Girls (3 - 5th Grade)

Clinic: Feb 12, Times TBA
Games: Sat AM starting March 1

Registration cost by Feb 9: registration open until rosters fill
checks payable to 'City of Norwalk'

1-2 grade

\$25 for Norwalk City residents/students & Ernsthausen Members
\$35 for out of town students

3-5 grade

\$35 for Norwalk City residents/students & Ernsthausen Members
\$45 for out of town students

Late registration cost as of Feb 10: \$5 late fee

(The Park & Rec. Dept. does offer financial assistance for youth fees.
Please contact the center for information).

All forms must be turned into the Ernsthausen Recreation Center, 100 Republic Street, Norwalk

Child's Name School Member Exp.
Address City Phone
Grade Birthdate Male Female Height Weight

PARENT EMAIL

(3-5th grade) Circle T-shirt Size: Youth Sm. Youth Med. Youth Lg. Adult Sm. Adult Med. Adult Lg.

Mother's Name Home Phone
Mother's Employment Business Phone
Father's Name Home Phone
Father's Employment Business Phone
Alternate person to be contacted Phone

Facts concerning your child's medical history including allergies, medications being taken, and any physical impairments that would be beneficial for this department to be aware of:

I agree that I will hold harmless and indemnify any rights and claims for damages against the Norwalk Parks & Recreation Dept. or the City of Norwalk for any injuries incurred during activities my child is participating in, including but not limited to exposure to or illness resulting from COVID-19. I assume all responsibility as a result of my child being permitted to participate in the programs. The alternates listed above are hereby authorized in my absence to consent for treatment to be given to my child. In the absence of myself and all alternates listed above, I hereby give my consent for treatment deemed necessary by any acting physician or dentist.

Signature of Parent or Guardian Date

Requests to be with certain players or coaches will not be made except in same household!!!

Interested in helping coach a team?
New Coach Returning Coach
Name Phone
Social Security # Birthdate
Email
I give permission to the Norwalk Parks & Recreation Dept. to perform the necessary background screenings, which may include driving history, criminal conviction history, and general public history.