

# VOLLEYBALL for Grades 4-6

Susan Silver, Teacher, Coach



Skills, Drills and Games! Improve your volleyball skills while having fun with your friends. Learn advanced skills and strategies while playing as a team.

**Mondays**

**5 sessions**

**March 19, 26, April 2, 9, 23, 2018**

**3:15-5 p.m.**

**Minimum: 12 Maximum: 24**

**HES Gym**

**Fee: \$79**



**REGISTRATION DEADLINE: MARCH 9 or earlier if full**

Class size is limited. Registration is on a first-come first served basis as received in the Community Education office. Confirmations are done via e-mail. Instructor substitutions may occasionally occur ie. Illness, teacher meetings etc.

Late pick-up may result in a \$1.00 per minute fee payable immediately to the instructor.

**REFUND POLICY** No refunds will be issued. Check will be returned only if a class is cancelled.

Please know that it is the policy of the Harvard Public Schools not to discriminate on the basis of race, color, sex, gender identity, religion, national origin, age, disability, or sexual orientation in its educational programs, activities or employment policies as required by Title IX of the 1972 Educational Amendments, Chapter 199, and Section 504 of the Rehabilitation Act of 1973. The district compliance coordinator is Marie Harrington, Director of Pupil Services, 978-456-4143.

Harvard Community Education, 39 Massachusetts Ave., Harvard, MA 01451  
978-456-4118 jcavanaugh@psharvard.org



## SPECTRUM REGISTRATION FORM - Volleyball Grades 4-6

**COMPLETE THIS FORM OR REGISTER ONLINE**

[www.psharvard.org](http://www.psharvard.org) Departments, Community Education, Spectrum

Name \_\_\_\_\_ Grade/Teacher \_\_\_\_\_

Allergies \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_

e-mail \_\_\_\_\_

Parent Name \_\_\_\_\_

Parent Cell # \_\_\_\_\_

Emergency Contact & phone \_\_\_\_\_

(Other than parent, in case parent cannot be reached)

**NOTE:** To register you must complete the online registration or return this paper form to the Community Ed office. You may pay by check or IF using the Unipay/online payment system, please email a copy of the receipt or Confirmation Number to [jcavanaugh@psharvard.org](mailto:jcavanaugh@psharvard.org). Registration can not be processed until we receive both registration and payment. **Paying online does not register you for a class!**

Make check payable to: **Town of Harvard**, 39 Mass. Ave., Harvard, MA 01451

Or pay online at [www.psharvard.org](http://www.psharvard.org) Online Payment Center

Volleyball, Grades 4-6 \$79

I, the undersigned, attest I am the parent or legal guardian of the above named child who attends the SPECTRUM program and agree to allow him/her to participate in the above listed SPECTRUM class. I further agree to indemnify and hold harmless the staff, administrators, and official assistants and to absolve them from any and all liability arising from my child's participation in this activity.

I have read and am fully aware of the policies (ie. late pick up, refunds etc.) of Harvard Community Education and the SPECTRUM Program.

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

Harvard Community Education, 39 Massachusetts Ave., Harvard, MA 01451