WEST CALDWELL-CALDWELL RECREATION

Girls Volleyball 2026

The girls playing Recreation Volleyball will be placed on teams to play in an in-town league. The program will be held on Tuesday and Thursday evenings beginning after the start of the school year.

If you should have any questions please contact the Recreation office at 973-226-3621 or e-mail us at recreation@westcaldwell.com.

Who: Girls entering grades 6, 7 & 8 in the fall of 2026 and are residents of West Caldwell and Caldwell.

When: Tuesdays and Thursdays (Travel schedule may vary)
Beginning mid to late September.

Where: Grover Cleveland Middle School

Fee: $75.00

TRAVEL VOLLEYBALL - For girls in grades 7 & 8
Travel Tryouts will be held in August. Tryout dates will be emailed to those who have registered (no cost). There will be more than one tryout to accommodate everyone. If your child is chosen to play on the travel volleyball team the fee will be $175.00 and there will be a uniform cost. ***Practices are 2-3 times a week for 2 hours.***

Register: Make checks payable and submit to:
WC-C Recreation
30 Clinton Road, West Caldwell, NJ 07006
Register online – https://register.communitypass.net/westcaldwell

Deadline: August 1 – Travel Volleyball Tryouts
August 21 – Recreation Volleyball
Registrations received after this date may be placed on a waiting list and may incur a $20.00 late fee.

SPORT PARENT AND SPECTATOR CODE OF CONDUCT PLEDGE (please read and sign on bottom of page)
I therefore agree:

1. I will remember that children participate to have fun and that the game is for youth not adults.
2. I will inform the coach of any physical disability or ailment that may affect the safety of my child or the safety of others.
3. I will learn the rules of the game and the policies of the league.
4. I will refrain from on field coaching of my child or other players during games and practices, unless I am one of the official coaches of the team.
5. I (and my guests) will be a positive role model for my child and encourage sportsmanship by showing respect and courtesy and by demonstrating positive support for all players, coaches, officials and spectators at every game, practice or other sporting event.
6. I (and my guests) will not engage in any kind of unsportsmanlike conduct with any official, coach player, or parent such as booing and taunting; refusing to shake hand; or using profane language or gestures.
7. I will not encourage any behaviors or practices that would endanger the health and wellbeing of the athletes.
8. I will teach my child to play by the rules and to resolve conflicts without resorting to hostility or violence.
9. I will teach my child that doing one's best is more important than winning, so that my child will never feel defeated by the outcome of a game or his/her performance.
10. I will praise my child for competing fairly and trying hard, and make my child feel like a winner every time.
11. I will never ridicule or yell at my child or other participants for making a mistake or losing a competition.
12. I will promote the emotional and physical wellbeing of the athletes ahead of any personal desire I may have for my child to win.
13. I will respect the game officials, recreation officials & coaches and their authority during games and will never question or confront game officials, recreation officials & coaches prior to, during or immediately following a game and if necessary, speak with coaches or recreation officials at an agreed upon time.

I also agree that if I fail to abide by the aforementioned rules and guidelines, I <u>may</u> be subject to disciplinary action that could include, but is not limited to the following:

- **Removal from game facility and or suspension from attendance of a parent or spectator at a future game or games.**

Parent's/Guardian's Signatures (1)_____ (2)_____Date _____

Name:_____Phone:_____

Address:_____☐WC ☐C

Birthdate:_____Age:_____School:_____Grade:_____

Email (Please Print):_____

I give my child permission to participate in the 2025 Volleyball program and to the best of my knowledge is physically fit to engage in this activity of the West Caldwell-Caldwell Recreation program. I understand that photographs or videos of my child, taken by Department of Recreation staff, may be used on the Township of West Caldwell website and social media sites

Parents Signature:_____Date:_____

☐**West Caldwell-Caldwell Special Needs Participant**