## Union Parks & Recreation Department 500 E. Locust St. • Union, MO 63084 636.583.8471 • www.unionmissouri.org/uprd

# Adult Co-ed Sand Volleyball League \$125/team

- $\Rightarrow$ Up to 12 players on roster; 6 on court
- $\Rightarrow$ Divisions: Recreational, Competitive
- $\Rightarrow$ Maximum of 3 men on court
- $\Rightarrow$ Players must be 18+ and out of high school
- $\Rightarrow$ # of games depend on # of teams
- $\Rightarrow$ Games will be played on Friday nights
- ⇒League will run May through August
- ⇒All games will be played at outdoor courts, located at 228 North Christina Avenue
- $\Rightarrow$ One (1) referee and volleyball provided per court
- $\Rightarrow$ Completed team roster will be due <u>prior</u> to the second game
- $\Rightarrow$ \$\$ is due at the time of registration
- $\Rightarrow$ Registration <u>deadline</u> is Monday, April 29, 2019!



RETU	RETURN THIS FORM WITH PAYMENT TO: UPRD / 500 East Locust Street / Union, MO 63084					
Fee: \$125/team <b>Rec</b>	□Comp	Method of Pay	vment:   Check #	Cash	Credit/Debit	
Team Captain's Name			Team Name			
Home Address		City	St	ateZi	ip	
Home Phone	Work Phone		Cell Phone			
Email Address (ONLY for lead	ue purposes)					

**Participant Release Statement**: I hereby, for the participant and myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against the City of Union, its successors and assigns, it's employees, agents, officers and directors for any and all injuries suffered by myself at any activity sponsored by these groups. I further understand the risks and dangerous situations attendant to the activity for which I am entering. I understand medical coverage is my responsibility. **PHOTO PERMISSION:** I grant permission for pictures to be used in the City of Union publicity materials. **ACTIVITY DISCLAIMER:** I understand that the City of Union reserves the right to cancel, combine or divide classes and/or leagues. In addition, there may be a need to change dates, times, locations, instructors, fees or program outline revisions of any activity offerings.

Team Captain's Signature	Date

#### Union Parks & Recreation Department + Co-ed Sand Volleyball + Spring 2019

For UPRD use only				
Registration Taken By	Date	Fee Paid	Entered By	Date

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### **Team Roster**

(Maximum of 12 players, including Captain)

1) Captain's Name	DOB	_ Age	Team Name		
Email Address (ONLY for league purposes)					
Home Address	City			State	_ Zip
Home Phone	Cell Phone				
Team Captain's Signature					
IMPORTANT PLEASE READ THOROUGHLY					

Waiver of Liability

In consideration for my participation in the ADULT CO-ED SAND VOLLEYBALL LEAGUE and for use of the Union Parks & Recreation Department (UPRD), the City of Union, facilities and equipment during this league in the year 2019, I hereby convenient and agree to (1) <u>hold harmless and indemnify</u> UPRD, the City of Union, it's employees, agents, officers and directors against an suit, claims, costs, attorney fees for and on account of any injury to myself. Having read this waive, knowing these facts and consideration of your accepting this document, I understand that (2) <u>there are inherent risks of injury</u> in ADULT CO-ED SAND VOLLEYBALL LEAGUE and I (3) <u>assume the risk voluntarily</u>. PHOTO PERMISSION: I grant permission for pictures taken during the league to be used in the City of Union publicity materials. ACTIVITY DISCLAIMER: I understand that the UPRD and City of Union reserves the right to cancel, combine or divide classes and/or leagues. In addition, there may be a need to change dates, times, locations, instructors, fees or program outline revisions of any activity offerings.

PLAYERS

2)	Name	DOB	Age
	Signature	Date	
3)	Name	DOB	Age
	Signature	Date	
4)	Name	DOB	Age
	Signature	Date	
5)	Name	DOB	Age
	Signature	Date	
6)	Name	DOB	Age
	Signature	Date	
7)	Name	DOB	Age
	Signature	Date	
8)	Name	DOB	Age
	Signature	Date	

9) Name	DOB	Age
Signature	Date	
10) Name	DOB	Age
Signature	Date	
11) Name	DOB	Age
Signature	Date	
12) Name	DOB	Age
Signature	Date	