Puyallup Parks & Recreation
Adult Volleyball—Spring Season 2014
Team Registration

The City or any third party that uses city property or facilities, or is required to obtain a permit, license or other form of approval from the City for a community athletics program, or participates in a community athletics program shall not discriminate against any person on the basis of sex or any other basis protected by federal or state law.

Registration Dates:

Mon, Feb 3 - Sun, Feb 9
City of Puyallup Resident Teams

Mon, Feb 10 - Until Filled or March 21
Open Registration

League begins: April 6, 2014

League finishes: May 18, 2014

Games: 12 (all games are played as double headers) *This is a self officiated league*

Fee: Non Resident $200
Resident Discount: $180
(State sales tax included.)

Requirements to be considered a resident team:
More than 50% of the team's players must be City of Puyallup residents, OR, teams must be sponsored by a City of Puyallup business.

No registration will be accepted without full payment.

Location: All league play will take place at the Puyallup Recreation Center located at 808 Valley Ave NW, Puyallup.

Rosters must have a minimum of 6 players (3 men & 3 women) with a maximum of 12 players.

To Register: Drop by your registration to the Puyallup Recreation Center will full payment or fax in the registration form to 253.770.3369 and call in your payment to 253.841.5457.

TEAM NAME:

____

_____ Resident Team ____ Non Resident Team
Resident through a City business sponsor payment _____
Resident by roster (51% living in City limits) ____

COACH INFORMATION

Coach ______________________________

Address ______________________________

City______________________ Zip ______________

Cell # ______________________________

Other # ______________________________

Email:
____

Assistant Coach ______________________________

Cell # ______________________________

Email:
____

LEAGUE PREFERENCE

______ **Recreation Division**
Game times 9am – 2pm. Players playing for fun and recreation with limited skills.

______ **Intermediate Division**
Game times 1pm – 6pm. Teams playing for fun and exercise with some skilled players.

______ **Competitive Division**
Game times 5pm or later. Competitive, skilled players with experience.

Do not write below this line – for office use only

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DATE________________ RECEIPT #________________ AMOUNT________________ BY___________

City of Puyallup Parks & Recreation

Participation Assumption of Risk, Waiver, and Release

Team Name: _____ Sport: _____ Division_____

Coach's Name:_____ Phone:_____ Resident Team ____ Non-Resident Team____

*****All players must sign this form to be eligible to participate*****

"I am eighteen years of age or older, fully competent and I desire to participate in the City of Puyallup's sponsored recreation activity. I am fully aware of the fact that there are special dangers and risks inherent in this activity, including, but not limited to, the risk of serious physical injury, death or other harmful consequences that may arise or result directly or indirectly to me from my participation in this activity. Being fully informed as to these risks and in consideration of my being allowed to participate in City sponsored activities and/or use of City facilities, I hereby assume all risk of injury, damage and harm to myself arising from such activities or use. I also hereby individually and on behalf of my heirs, executors and assigns, release and hold harmless the City of Puyallup, its officials, employees and agents and waive any right of recovery that I might have to bring a claim or a lawsuit against them for any personal injury, death or other consequences occurring to me arising out of my voluntary participation in this activity."

Players Name (Printed)	**Signature**	**Date**	**Address**	**City**	**Zip**	**Phone**