



# 2009 VOLLEYBALL ENTRY FORM

THIRD SESSION: Sunday, August 9<sup>th</sup> through October 1<sup>ST</sup>  
*ENTRY FEE COVERS ENTIRE FIRST SESSION – NO WEEKLY FEES*  
 TIMES WILL NOT BE RESERVED WITHOUT PAYMENT

\*Indicate your first, second, and third choice:

COED 6'S		FOUR PLAYER	DOUBLES	
RECREATIONAL	INTERMEDIATE	INTERMEDIATE	INTERMEDIATE	POWER
___ 7:00 SUNDAY	___ 7:00 SUNDAY	___ 6:00 SUNDAY	___ 5:00 SUNDAY	___ 6:00 SUNDAY
___ 8:00 SUNDAY	___ 7:00 MONDAY	___ 8:00 SUNDAY	___ 6:00 SUNDAY	___ 5:45 MONDAY (MEN'S SHORT COURT)
___ 7:00 MONDAY	___ 7:00 TUESDAY	___ 6:00 MONDAY	___ 6:00 MONDAY	___ 6:00 TUESDAY (WOMEN'S)
___ 8:00 MONDAY	___ 7:00 WEDNESDAY	___ 8:00 MONDAY	___ 8:00 MONDAY	___ 6:00 THURSDAY (COED)
___ 7:00 TUESDAY	___ 8:00 WEDNESDAY	___ 6:00 TUESDAY	___ 6:00 TUESDAY	
___ 8:00 TUESDAY	___ 7:00 THURSDAY	___ 6:00 WEDNESDAY	___ 6:00 THURSDAY	
___ 7:00 WEDNESDAY		___ 6:00 THURSDAY		
___ 8:00 WEDNESDAY				
___ 7:00 THURSDAY				
___ 8:00 THURSDAY				
\$168.00 a team if paid by 7/31/09 after \$180.00  Sunday & Monday Teams \$150.00 per team (7 weeks due to Labor Day)		\$120.00 per team  Sunday & Monday Teams \$105.00 per team (7 weeks due to Labor Day)	\$60.00 per team  Sunday & Monday Teams \$52.00 per team (7 weeks due to Labor Day)	

Checks payable to **Volleys**. Mail check and entry form or drop off in person:  
 VOLLEYS, 265 Blairs Ferry Road NE, Cedar Rapids, IA 52402 (319) 377-9483  
 Web Site: [crrvolleys.com](http://crrvolleys.com) E-Mail: [volleys@crbowl.com](mailto:volleys@crbowl.com)

TEAM NAME: \_\_\_\_\_

Captain \_\_\_\_\_ email address: \_\_\_\_\_

Cell/Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

**PLEASE HAVE ALL PLAYERS COMPLETE ROSTER AND WAIVERS ON BACK OF ENTRY FORM.**

## **Volleys participants: Release, Waiver and Indemnifications/Hold Harmless**

In consideration of receiving permission from *TEP, Inc. dba Volleys* to participate in the highly competitive and potentially dangerous sport of volleyball upon the premises of *TEP, Inc. dba Volleys*, I hereby release *TEP, Inc. dba Volleys*, its officers, its owners, its employees, its agents, its volunteers, and/or their assigns from any and all liability, claims and causes of actions whatsoever for any loss, damage, or injury (including death), sustained to my person or my property arising out of or having any casual connection to my preparation for , practicing for, and/or participating in any sports or athletic contest or exhibition, whether or not such contest or exhibition is organized or occurs spontaneously.

I am fully aware of and voluntary assume all of the risks and hazards associated with participating in volleyball on the premises of *TEP, Inc. dba Volleys*. Additionally, I release *TEP, Inc. dba Volleys* its officers, its owners, its employees, its agents, its volunteers, and/or their assigns from duty whatsoever as respects selection or supervision of any other participants that have any casual connection to injury or damage I may sustain. In addition, I shall never charge *TEP, Inc. dba Volleys*, its officers, its owners, its employees, its agents, its volunteers, and/or their assigns with actual or constructive knowledge of whether or not my health, condition, fitness and/or ability is such that I am physically able to participate in volleyball.

I assume full responsibility for any injuries or damage which may occur to me or my property and agree *TEP, Inc. dba Volleys*, its officers, its owners, its employees, its agents, its volunteers, and/or their assigns shall not be responsible for any loss or theft of my property.

In addition, I assume all responsibility to provide myself with whatever safety pads, guards, braces and/or equipment that I deem appropriate for my safety or the safety of others.

As further consideration of receiving permission from *TEP, Inc. dba Volleys* to participate in the highly competitive and potentially dangerous sport of volleyball, I do hereby agree to indemnify, protect and save harmless *TEP, Inc. dba Volleys*, its officers, its owners, its employees, its agents, its volunteers, and/or their assigns from all costs, all expenses, all claims, all suits and all judgments arising out of or having any casual connection to injury to me or my property.

**THIS RELEASE, WAIVER and INDEMNIFICATION/HOLD HARMLESS SHALL HAVE UNLIMITED DURATION AND MAY NOT BE MODIFIED OR REVOKED BY ME WITHOUT THE WRITTEN PERMISSION OF AN AUTHORIZED REPRESENTATIVE OF *TEP, Inc. dba VOLLEYS*.** Any attempt by me to revoke shall constitute immediate removal of permission by *TEP, Inc. dba Volleys* to participate in the highly competitive and potentially dangerous sport of volleyball.

I have state that I am fully able and willing to enter into this agreement for the year 2008. I am of legal age; I am competent; I am not under the influence of alcohol; I am not under duress.

### **Team Members**

Name \_\_\_\_\_ Address/ZipCode \_\_\_\_\_

Signature \_\_\_\_\_ EmailAddress \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Address/ZipCode \_\_\_\_\_

Signature \_\_\_\_\_ EmailAddress \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Address/ZipCode \_\_\_\_\_

Signature \_\_\_\_\_ EmailAddress \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Address/ZipCode \_\_\_\_\_

Signature \_\_\_\_\_ EmailAddress \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Address/ZipCode \_\_\_\_\_

Signature \_\_\_\_\_ EmailAddress \_\_\_\_\_ Phone \_\_\_\_\_

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Signature \_\_\_\_\_ EmailAddress \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Address/ZipCode \_\_\_\_\_

Signature \_\_\_\_\_ EmailAddress \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Address/ZipCode \_\_\_\_\_

Signature \_\_\_\_\_ EmailAddress \_\_\_\_\_ Phone \_\_\_\_\_

**Anyone under the age of 18 is required to have a parental consent form.**