



**Sand Volleyball Team Registration Form and Liability Waiver
(ALL FORMS MUST BE COMPLETED)**

TODAYS DATE _____ TEAM CAPTAIN _____
CONTACT NUMBER _____ CAPTAINS EMAIL _____
TEAM CAPTAIN ADDRESS _____
CITY _____ STATE _____ ZIP _____
TEAM NAME _____

*** All players must be at least 21 years of age to participate. Your team must consist of male and female competitors. There must be at least 3 females on the court at ALL times. Your roster must have at least 6 players and a maximum of 10 players**

***Pay your team registration fee (\$275) at www.thecityleague.com/registration or send your check and this completed form to The City League 1996 Greenglen #303, Kirkwood, MO 63122.**

AMOUNT ENCLOSED \$ _____ CHECK NUMBER _____

CAPTAIN SIGNATURE _____ DATE _____

TEAM ROSTER

PLAYER 1 NAME _____

EMAIL _____

PLAYER 2 NAME _____

EMAIL _____

PLAYER 3 NAME _____

EMAIL _____

PLAYER 4 NAME _____

EMAIL _____

PLAYER 5 NAME _____

EMAIL _____

PLAYER 6 NAME _____

EMAIL _____

PLAYER 7 NAME _____

EMAIL _____

PLAYER 8 NAME _____

EMAIL _____

PLAYER 9 NAME _____

EMAIL _____

PLAYER 10 NAME _____

EMAIL _____

INDEMNIFICATION, WAIVER AND RELEASE OF CLAIMS

In consideration of being allowed to participate in any way in the "The City League" sand volleyball program, related activities and events (the "Program"), the undersigned acknowledges, appreciates and agrees that:

1. The risk of injury from the activities involved in the Program is significant, including the potential for permanent disability and death, and while particular rules, equipment and personal discipline may reduce the risk, the risk of injury to me exists; and,

2. **I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS**, both known and unknown, **EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES** or others, and assume full responsibility for my participation; and,

3. I willingly agree to comply with the stated and customary terms and conditions for participation, including the rules, regulation and officiating of The City League. If I observe any unusual significant concern in my readiness for participation and/or in the Program itself, I will remove myself from participation and bring such to the attention of the officials or authorized personnel of The City League; and,

4. I, for myself and on behalf of my heirs, assigns, personal representatives, **HEREBY RELEASE** The City League, its assigns, successors, employees, agents, invitees, sponsors, participants, owners, directors and members, and the lessors of the premises used to conduct the Program, and all other persons or entities involved, directly or indirectly, in the Program (the "Releasees"), **WITH RESPECT TO ANY AND ALL INJURIES, personal or property, DISABILITIES, DEATH, or LOSSES or DAMAGES** to person or property, **CLAIMS, CAUSES OF ACTION**, known or unknown, incident to or arising out of my involvement or participation in the Programs, or observation thereof, **WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE**, to the fullest extent permitted by the laws of the State of Missouri; and,

5. I, for myself and on behalf of my heirs, assigns and personal representatives, **HEREBY INDEMNIFY and HOLD HARMLESS** all of the Releasees from any and all liabilities incident to my involvement or participation in the Program, **EVEN IF ARISING FROM THEIR NEGLIGENCE**, to the fullest extent permitted by the laws of the State of Missouri.

6. I have received and carefully read each and every rule and regulation of The City League and agree to be bound by the terms and conditions of such rules and regulations, as the same may be changed from time to time, without notice, by The City League. I understand that my failure to abide by any such rules or regulations, or the directive of the officials or authorized personnel of The City League, may result in remedial action including, but not limited to, my immediate dismissal from the Program and forfeiture of monies paid for my participation in the Program.

FORM I HAVE CAREFULLY READ AND UNDERSTAND THE TERMS OF THIS LEGAL DOCUMENT AND UNDERSTAND THAT THIS DOCUMENT IS INTENDED AND SHALL BE CONSTRUED TO BE A FULL AND FINAL RELEASE AND WAIVER OF ALL CLAIMS AGAINST THE RELEASEES AND AN INDEMNIFICATION FROM ALL LIABILITIES.

Team Name

Team Captain Address

City

State

Zip Code

Team Captain Full Name (please print)

Age

Signature

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| Full Name (please print) | Age | Signature |
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