

# Volleyball Spike & Dig Outdoor League 2017

#### **IMPORTANT DATES AND FEE INFO**

All Divisions	\$299 Early Bird
Early Bird Registration Deadline	05/16/17
Regular Registration Deadline (add \$50 after this day)	05/23/17
Rosters Online Due	05/24/17
Schedules Available Online	05/29/17

**DEADLINE FOR EARLY BIRD REGISTRATION FEE: 05/16/17** 

#### **IMPORTANT INFORMATION**

FORMAT: League Starts on 5/31 and runs for 7 weeks. End of Season Tournament on 7/19 Outdoor Grass Co-ed 6's Volleyball League. All the games played at Dwight Merkel.

#### **RULES:**

Special Rules will be posted online in our sports page at www.spokaneparks.org.

#### **REGISTRATIONS:**

- Early Bird Registration \$299 through May 16th. After that date the regular registration rate applies \$349 through May 23rd.
- Registrations are to be paid in full. We do not take payments. Please submit the complete registration fee (including sponsor(s) check(s) along with the "Classification Form" when you register.
- League Director may contact team coach/captain prior to necessary changes made effective.
- Rulebooks, scorebook, lineup cards, & softballs are included in the registration fee. Starting
  times are tentative, teams are not guaranteed a 6:30pm start for a double header. Divisions may
  be combined. Offers subject to change from printed. For more information please check www.
  spokaneparks.org/sports.

#### **TEAM MANAGEMENT:**

- Waiver of Liability must be signed by all players and submitted to league supervisor at the Sports Complexes prior to playing your first game of the season. No signed waiver= NO PLAYING!
- Coaches/Captains must enter the team rosters online roster by 5/24/16. Rosters can be edited as needed.

Go to www.teamsideline.com/spokane

#### QUESTIONS?

Call Adriano Eva 509-625-6625 or email aeva@spokanecity.org Carissa Ware 509-625-6208 or email cware@spokanecity.org



### **c/o Adriano Eva – Athletic Programs** 808 W Spokane Falls Blvd. 5th Floor Spokane, WA 99201-3317 509-625-6625

SPRD SPIKE & DIG OUTDOOR- CLASSIFICATION SHEET					
TEAM NAME					
TEAM CAPTAIN					
Address	City	State	ZIP		
Phone	Email				
TEAM SPONSOR? No $\square$ Yes $\square$ – IF Yes, complete info below (if more than one, please provide)					
Sponsor Name and Contact Person					
Address	City	State	ZIP		
Phone	Email				
WHAT SPIKE & DIG OUTDOOR ARE YOU REGISTERING FOR?					
☐ Competitive B Division (371	78)	Recreational C Division (3	7179)		
<b>IMPORTANT:</b> Teams are not guaranteed in the division they request. League coordinator may contact captain or coach prior to making necessary changes effective. <b>Starting times are tentative, teams are not guaranteed a 6:30 p.m. start for a double header.</b>					

Office Use Only	Received date:	Received by:		
Sponsor Payment	\$	Circle: Cash Credit Check#		
Team Payment	\$	Circle: Cash Credit Check#		
TOTAL	\$			



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#### **INDEMNITY AGREEMENT**

I have requested that I be allowed to participate in an activity/class/event through the City of Spokane Parks & Recreation Department. I acknowledge that the activity/class/event in which I am participating may be physically and mentally challenging and/or dangerous. As such, I expressly acknowledge and understand that my participation is voluntary and may involve the risk of injury, property damage, or even death. I agree that before I participate in the above activity/class/event, I understand the nature of this program, the facilities, equipment, and areas to be used, and, if I believe any of them are unsafe, I will immediately advise the person(s) in charge.

HOLD HARMLESS AGREEMENT: in consideration for being permitted to participate in the activity/class/event hosted by the City of Spokane, to the maximum extent permitted by law, I voluntarily assume all risks of bodily injury or property damage associated with participation. I agree to defend, indemnify, and save harmless the City of Spokane, its appointed and elected officers, employees, agents, and representatives from and against all loss or expense including but not limited to judgments, settlements, attorney fees, and costs for bodily injury, death, or property damage arising out of any act or omission under or in connection with my participation except only such injury as shall have been occasioned by the sole negligence of the City of Spokane, its appointed and elected officers, employees, agents, or representatives. To the extent any of the damages referenced herein were caused by or resulted from the concurrent negligence of the City of Spokane, its elected and appointed officers, employees, agents, or representatives and others, this obligation to indemnify, defend, and hold harmless is valid and enforceable to the extent of the negligence of the participant. I hereby consent to first aid, emergency medical care and if necessary, admission to an accredited hospital when necessary for executing such care, for treatment of injuries that I may sustain while participating in the above-referenced activity/class/event.

I understand that it is my obligation to have a health insurance policy in effect while participating in the above-referenced activity/class/event and to otherwise be responsible for any and all medical expenses which may be incurred while participating. I grant full permission to use any photographs, videotapes, video clips, or recordings for publicity purposes by the City of Spokane. I understand and agree that this Waiver and Release of Liability is governed by laws of the State of Washington and is intended to be as broad and inclusive as permitted by law and that if any part of it is held to be invalid, the balance of this document shall continue in full force and effect. I certify that I have carefully read all of the foregoing provisions, that I know and understand the contents hereof, that I have had the opportunity to seek legal counsel prior to signing it, and voluntarily sign this Waiver and Release of Liability as my own free act.

TEAM NAME: DIVISION:

PRINT PLAYER NAME	SIGNATURE	T-SHIRT SIZE
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		