

ADULT COED 6 v 6 SAND VOLLEYBALL LEAGUE ROSTER (SUMMER)

Team:	League:	
Sponsor:		
Mailing Address:	City:	Zip:
Manager:	Phone:	Work:
E-mail Address:		Cell:
Assistant Manager:	Phone:	Work:
E-mail Address:		Cell:

Games: Sunday afternoon/evenings

League Dates: June 11 - July 30

Single Elimination Tourney: August 6

Fee for League - \$125 per team
Registration Deadline: Friday, June 2

*All team & participant information is required!

<u>Name</u>	<u>Age</u>	<u>Phone Number</u>
<u>Fees Due:</u>	<u>Date:</u>	<u>Staff:</u>

Team Waiver:

I certify that all players listed above are in normal health and capable of participation Tipton Recreation Adult Sand Volleyball League.

I grant permission for him/her to play and in doing so I hereby release any rights and claims for injuries and damages I may

have against the Tipton Recreation Department, its Board of Directors, employees, officials, or coaches. I understand that the Tipton Rec. Dept.

does NOT carry accident insurance on league participants.

Manager's Signature: _____ **Date:** _____