



**SAND VOLLEYBALL
REGISTRATION FORM**
CITY OF WEST LINN
PARKS & RECREATION DEPARTMENT



PLAYER 1 NAME _____ M/F ___ BIRTHDATE _____
PHONE _____ E-MAIL _____
ADDRESS _____ HOME PHONE _____
EMERGENCY CONTACT _____ PHONE NUMBER _____

PLAYER 2 NAME _____ M/F ___ BIRTHDATE _____
PHONE _____ E-MAIL _____
ADDRESS _____ HOME PHONE _____
EMERGENCY CONTACT _____ PHONE NUMBER _____

DIVISION: **HIGH SCHOOL** 14U / 16U / 18U **ADULT**
 BEGINNER/INTERMEDIATE ADVANCED
 MALE FEMALE CO-ED (FOR ADULT DIVISION OPTION ONLY)

TEAM NAME _____ **TEAM PROGRAM FEE: \$30.00**

T-SHIRT SIZE- PLAYER 1	__SMALL	__MEDIUM	__LARGE	__EXTRA LARGE
T-SHIRT SIZE- PLAYER 2	__SMALL	__MEDIUM	__LARGE	__EXTRA LARGE

Make \$30 check payable to: *City of West Linn*
Mail to or drop off: Recreation Program
 West Linn City Hall
 22500 Salamo Road, No. 1100
 West Linn, Oregon 97068
 Telephone: 503-557-4700

REFUND POLICY:

Full refunds are given only when a class is cancelled by Parks & Recreation. Participants canceling must pay a \$10.00 service charge. No refund after program has started.

WAIVER

In participating in Recreation Programs, sponsored by The City of West Linn, I hereby acknowledge that I understand that there are risks of accidents resulting in bodily harm to me/my dependant arising out of those activities. I understand that Recreation activities are planned with the safety of the participants in mind. I further acknowledge that I/my dependant has the physical capacity reasonably necessary to engage in Recreation activity for which I have enrolled. In case of emergency, accident or illness, I give my permission to be treated by a professional medical person and admitted to a hospital if necessary. I agree to be the party responsible for all medical expenses which are incurred in my/my dependant's behalf. It is understood and agreed that the City, its Mayor, City Council, Boards, employees, volunteers and agents shall be held harmless against all claims, damages, loss or expenses including attorney's fees arising out of or resulting from my participation in recreation programs. I agree pictures taken may be used for future promotions.

_____ ** I have read the above waiver and understand the contents**
(Initial)

_____ If minor Parent/Guardian Signature Required