

Volleyball of The Rockies COED 6X6 Hardcourt Winter 2010 Session February - April

Inverness Sports Complex

**Start Date:
Monday, February 15th**

Location
- I-25 and just off of Dry Creek @ The old Sportsbridge building in DTC
Maps on www.InvernessSports.com

Format (Different Depending on Night)
- Two 1 Hour Matches, 6 total games 8 wks long(MONDAY ONLY)

	Time	Format	# of Teams
Monday	8:30-10:30pm	(Two) 1 Hr Matches	12 Teams

Hardcourt League Waiver and Release

Volleyball of the Rockies Manager/Captain Indemnification Agreement: Manager/Captain shall indemnify and hold harmless Volleyball Of The Rockies d.b.a. The Island (hereafter referred to as VOTR) from and against all claims, liabilities, causes of action or other legal proceedings stemming from claims of negligence against VOTR or any other claim in tort or contract, by any Manager or third party whom Manager allows to participate in VOTR activities, for damage to property, injury or death of any person or persons in any way arising out of, connected to, or resulting from Manager allowing that third party or team member to participate in VOTR activities, including playing indoor or outdoor, in a confined space which might include running into equipment, fixtures, or other players, as well as, being hit by volleyballs or slipping on a wet surface while at Metro, without first signing a VOTR Waiver and Release form (such form shall be made immediately available upon request from VOTR Manager). Indemnification shall include the obligation to defend any and all actions, claims, or other legal proceedings and to reimburse VOTR for all expenses, including costs and attorney's fees incurred in connection therewith, regardless of whether such claims arose out of negligence of VOTR, its directors, agents, employees, servants, or assigns.

I HAVE READ THIS WAIVER AND RELEASE COMPLETELY AND UNDERSTAND ITS CONTENTS FULLY. I AM SIGNING THIS WAIVER AND RELEASE VOLUNTARILY.

Captain's Name (Printed) _____ Captain's Signature _____ Date _____

We reserve the right to move teams between divisions on the same night of play to improve the competition.

Captain: _____

EMAIL _____

Address _____

City _____ Zip _____

Home Phone _____

Cell Phone _____

Work Phone _____

Returning Captain from Winter '10 (circle) Yes No

Level (circle choice) AA / A BB B Rec

Division Played (circle choice) I II III

Night

Level's Available

Monday @ Inverness Intermediate

\$450 dbl hdrs 8wks

Subtract \$5 per person for 2010 VOTR/Island

Members (Up to \$30 per team)

Full Payment Not Received w/ Registration Form

Returned Check/NSF or Bad Credit Card

\$5 (____)

\$25 _____

\$20 _____

Total \$



Payment

Name as it appears on card _____

Check # _____

Visa, MC, Amex, Disc. Credit Card # _____

Cash \$ _____

Expiration Date _____

Billing Address Street # _____ Zip _____

The Island 2233 S. Geneva St., Denver, CO., 80247

Phone: 303-745-2255 FAX: 303-745-1937

www.votr.com leaguemanager@votr.com

Office use only below this line:

Date/Time Recvd: _____ (01/10)