



*In order to practice or participate/be put on the game schedule, the registration fee must be paid in full on or before the registration deadline.*

# Richmond Parks & Recreation

## Adult Co-ed Volleyball League

*(High school- adult)*

**REGISTRATION DEADLINE: February 18, 2022**

**Registration Fee: \$200.00 per team Games Begin: March 13, 2022**

**Captains Meeting: March 9, 2022 at 5:45pm in the Gym (game schedules & rules will be available during this meeting)**

*(Teams play three women and three men at a time)*

**Team Captain:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

I, the participant or the guardian of the below named candidate for a position on a Parks & Recreation team, hereby give my approval to participate in any and all recreation activities, including transportation to and from the activities. I know that participation in sports may result in serious injuries and protective equipment does not prevent all injuries to players. I am aware Richmond Parks & Recreation has put in place preventative measures to reduce the spread of COVID-19; and I acknowledge the contagious nature of COVID-19, and I realize Richmond Parks & Recreation cannot guarantee that myself or my child(ren) will not become exposed or infected with COVID-19, and I voluntarily assume the risk that my child(ren) or I may have a chance of being exposed to or infected by COVID-19 by participating in the volleyball league. I hereby waive, release, absolve, indemnify and agree to hold harmless the Richmond Parks & Recreation Department, City of Richmond, the organizers, sponsors, supervisors, officials participants and persons transporting myself/ or my child to and from activities for any claim arising out of any injury to myself or my child whether the result of negligence, COVID-19, or for any other cause. I agree to return equipment issued in as good condition as when received, except for normal wear and tear. I have read and fully understand the above program details and waive and release all claims including damaged, stolen, or lost property that could occur during the recreation event. In addition, I agree, understand, and allow the City of Richmond to take and use mine or my child's photograph, likeness, name, statement, or video. I understand that the City of Richmond may use the photograph, likeness, name, statement or video for the purposes of publication, presentation, websites, and social media channels. I have read and fully understand the above program details and waive and release all claims.

I agree to abide by the rules and regulations as set forth by the Richmond Parks & Recreation Department, for my child (myself, and our family's participation in the program). I understand that this includes, but is not limited to, good sportsmanship toward the officials, coaches, and opposing players and their coaches and fans. **FAILURE TO DO SO MAY RESULT IN EXPULSION FROM THE GYM FOR REMAINDER OF GAME AND ALL FUTURE GAMES.**

Signing below means that you have read and agree with the above.

### **Team Roster**

	<b>NAME</b> <i>(PRINT CLEARLY)</i>	<b>PHONE</b>	<b>SIGNATURE</b> <i>(IF UNDER 18, GARDIAN MUST SIGN)</i>	<b>DATE</b>
1.				
2.				
3.				
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12.				

**PROGRAM POLICIES:** The Richmond Parks & Recreation Department reserves the right to cancel, combine or divide classes or programs; to change the time, date, fee or place of meeting or to make necessary revisions in any program when necessary—NO REFUNDS.

**Questions? Please e-mail: [Hwilliams@cityofrichmondmo.org](mailto:Hwilliams@cityofrichmondmo.org)**

Please return to: City Collector's Office, 205 Summit, Richmond, MO 64085, M-F, 8:00am-4:30pm.

Cannot make it to City Hall by 4:30? Put the fee/form in an envelope and put it in the "after hours" box outside of City Hall.

**DO NOT PUT CASH IN THE "AFTER HOURS" BOX.**

Make checks payable to: *City of Richmond.*

Office Use Only: Amount Paid \$ _____	Date Rec'd _____	By _____
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