

# MEN'S / WOMEN'S VOLLEYBALL 2021 TEAM REGISTRATION FORM

Please check desired league:

\_\_\_\_\_ MEN'S LEAGUE

\_\_\_\_\_ WOMEN'S LEAGUE

TEAM NAME: \_\_\_\_\_

TEAM MANAGER'S NAME: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

Did your team play last year?      YES      NO

If yes, under what team name? \_\_\_\_\_

If there are 8 divisions in the league, which division would be your team's preference?  
(Circle division choice)

1    2    3    4    5    6    7    8

(BEST.....LOWEST)

NOTE: The division you select for your team does not guarantee a level of league play. It merely gives league officials an indication of the level at which you feel your team will be most competitive. It is important that you are as honest as possible.

*Note: All teams must be prepared to play any weeknight during the City League Tournament.*

**When registering, you must have at least six (6) players listed with complete and accurate information, including signatures.**

If there is one night of the week you cannot field a team write that day down.

\_\_\_\_\_

# 2021 Roster & Liability Release Form

I agree to abide by the established rules of the facility or program. I understand that the City of Casper does not carry accident insurance for participants in recreation programs. I also agree to release the City of Casper, its Council, Manager, officers, employees, agents, subcontractors, the Casper Recreational Leagues Association, and the Community Recreation Foundation from any and all liability, responsibility, claims, demands, actions, or causes of action whatsoever arising out of my injury or death, or damage or loss of property while upon any City of Casper premises or while participating in any activities. The terms of this release and Indemnification are contractual and not a mere recital. The undersigned acknowledges by execution of this Release and Indemnification that he/she understands these provisions and freely and voluntarily enters into them.

By signing and submitting this Liability Release Form, I understand that I am a legally rostered player for the team listed. If it is discovered that I played illegally for a different team, I will be suspended for 2 games and must pay \$50 to be eligible once the suspension ends. I also understand that games played using an illegal player will be forfeited.

**TEAM NAME:** \_\_\_\_\_

PRINT PLAYER'S INFORMATION BELOW ALONG WITH THE PLAYER'S SIGNATURE:

NAME	ADDRESS	PHONE #	SIGNATURE
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

TEAM MANAGER: \_\_\_\_\_ MAIN CONTACT #: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

ASSISTANT MANAGER: \_\_\_\_\_ MAIN CONTACT #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

**FORM MUST HAVE AT LEAST SIX (6) PLAYERS LISTED WITH COMPLETE AND ACCURATE INFORMATION, INCLUDING SIGNATURES**