

GRIMES FUNTASTIC DAYS

CO-ED SAND VOLLEYBALL

AGE GROUPS:

18 & UNDER

19 & OVER

4 VS. 4

(TEAMS OF 6)

DATE: SATURDAY JUNE 14, 2007

TIME: 12:00 PM-4:00 PM

LOCATION: GRIMES SPORTS COMPLEX

NO ENTRY FEE!!!!

For more information contact:

Angela Reed at areed@dc-grimes.k12.ia.us

FUNTASTIC DAYS COED SAND VOLLEYBALL TOURNAMENT

ENTRY FORM

Team Name:

Participants:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

Team Contact:

Phone Number:

Email:

Please mail or drop off this completed form to:

**Bankers Trust
110 S Main
Grimes, IA 50111**

For more information please contact:

Angela Reed at areed@dc-grimes.k12.ia.us

CITY OF GRIMES SAND VOLLEYBALL WAIVER AND RELEASE

In consideration for being able to participate in the Grimes sand volleyball leagues and tournaments, I hereby release the city of Grimes, its employees and agents, from any and all liability which I may have against the city of Grimes for any physical injuries which I receive in participating in the Grimes sand volleyball leagues and tournaments. In making this release and waiver, I acknowledge that I could receive personal injuries by participating in sand leagues and tournaments which include, but are not limited to, injuries to my eyes, face, arms, legs and back resulting from contact of my body with other players, the ground, volleyball equipment, and the volleyball itself. I also acknowledge that the sand may contain dangerous foreign objects, including, but not limited to, rough rocks or stones, hard plastic, metal, or glass which could injure me. I acknowledge that it is my responsibility and option to wear proper equipment to protect my body from injury, including shoes, safety glasses, or padding to protect my body from injury.

I HAVE READ THE PRECEEDING RELEASE, UNDERSTAND ITS CONTENTS, AND FREELY SIGN IT ON MY OWN BEHALF.

Signature

Address

Print Name

E-mail Address

Date

Phone