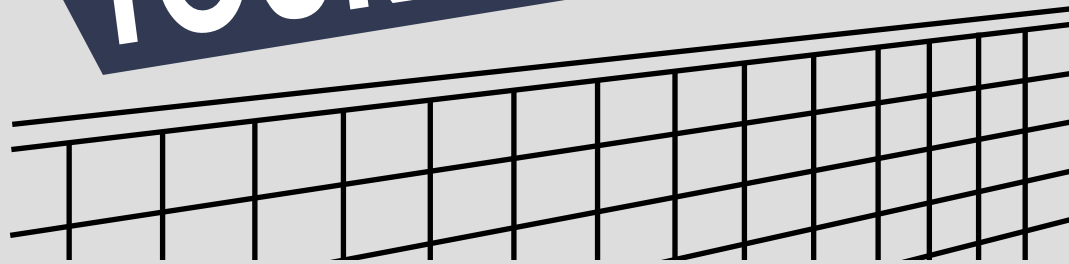


CO-REC AND WOMEN'S **VOLLEYBALL** TOURNAMENT



CO-REC

Saturday, Feb. 6

1-9pm

\$120*/team

WOMEN'S

Sunday, Feb. 7

8am-4pm

\$120*/team

Teams are guaranteed six round-robin games with the top four teams in each pool advancing to a single-elimination championship. An upper division (A and B level teams) & lower division (C and D recreational teams) will be offered for the Co-rec and Women's tournaments. Registration deadline Jan 22 or until filled.

Register at www.applevalleymn.gov/volleyball.

*\$10 discount available for current Apple Valley league teams

Apple Valley Community Center, 14603 Hayes





Mid-Winter Fest Volleyball Tournament Registration Form

Team Name _____
(as you want it to appear on the schedule—limited to 20 characters)

Manager's Name _____

Email _____

Phone _____

Address _____ **City** _____ **Zip** _____

Assistant Manager _____ **Email** _____ **Ph** _____

Team Status: New Returning

Previous team name:

Year: 2018 2019 2020

Division(s): Upper Lower

Please read this document carefully before signing.

- I wish to participate in Adult Athletic Leagues ("Activity") sponsored by the City of Apple Valley, Minnesota ("City") during the season listed on this form.
- I understand that by signing this Waiver and Release of Liability I am waiving certain legal rights; and, I accept this and sign this Waiver of my own free will.
- My participation in the Activity is voluntary. No one is forcing me to participate. I acknowledge that the Activity is not an essential service provided by the City.
- I acknowledge that participating in the Activity carries with it certain inherent risks. Injuries may result from use of athletic equipment, fields and park grounds including, but not limited to failure of equipment, being struck by balls, and the failure of others to observe safety rules. I assume any and all risks, both known and unknown, while participating in the Activity.
- To the best of my knowledge I have no physical or medical conditions that would prevent me from participating in the Activity.
- In consideration of being allowed to participate in the Activity, I understand and agree that neither the City nor any person acting on behalf of the City, may be held liable in any way for any event which occurs in connection with the Activity which may result in harm, death, injury or damage to me. This waiver of liability does not waive liability for any injuries that I obtain as the result of willful, wanton or intentional misconduct by the City or any person acting on behalf of the City.
- I agree to comply with all rules related to the Activity. If I observe any unusual or significant hazard during my participation in the Activity, I will stop participating and immediately notify the nearest official.
- I agree to defend, indemnify and hold harmless the City for any expense or liability the City may incur as a result of my conduct, action or omissions while performing the Activity.
- It is my express intent that this Waiver and Release of Liability shall bind the members of my family, if I am alive, and my heirs, assigns and personal representatives if I am deceased.
- I grant permission for the use of any photographs, motion pictures, recordings, or any other record of my participation in this Activity for any legitimate purpose, without financial or other compensation or royalties.
- If any court finds any portion of this Waiver and Release of Liability to be contrary to law, invalid, or unenforceable, the remainder of the Waiver and Release of Liability will remain in full force and effect.
- My signature indicates that I read this entire document, understand it completely, acknowledge that it cannot be modified or changed in any way by oral representations, and agree to be bound by its terms.

Sign: _____ Date: _____

| Mid-Winter Fest Volleyball Tournament | | | | |
|---------------------------------------|-----------------------------------|-------|-----|-------|
| | Co-Rec (Sat) | Upper | A/B | \$120 |
| | Co-Rec (Sat) | Lower | C/D | \$120 |
| | Women's (Sun) | Upper | A/B | \$120 |
| | Women's (Sun) | Lower | C/D | \$120 |
| | Apple Valley League Team Discount | | | -\$10 |
| | List Team Name & Division: | | | |

How to Register

- **TWO WAYS TO REGISTER:**
 - **Online:** www.applevalleymn.gov/volleyball
 - **Scan & email registration form:** AVathletics@applevalleymn.gov
- **PAYMENT:** After submitting registration, call in payment with a credit card to 952-953-2300