

# REEF VBC Clinic Registration Form

Preferred Position (If you play more than 1 please list order)

Setter \_\_\_\_\_ Middle Blocker \_\_\_\_\_ Outside Hitter \_\_\_\_\_ Def. Specialist \_\_\_\_\_ Opposite \_\_\_\_\_

Name\* \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone\* \_\_\_\_\_ Cell Phone \_\_\_\_\_

Age \_\_\_\_\_ Birth Date\* \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ Shirt Size \_\_\_\_\_

Email\* \_\_\_\_\_

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_

School\* \_\_\_\_\_ Grade \_\_\_\_\_

## Volleyball Experience

School Years Played: Varsity \_\_\_\_\_ JV \_\_\_\_\_ Fr/So \_\_\_\_\_ Jr. High \_\_\_\_\_

Club & Years Played \_\_\_\_\_

How did you hear about REEF VBC? \_\_\_\_\_

## REEF VBC Waiver and Release of Liability

This form must be signed before any person can participate for REEF VBC as a player participant in the club's volleyball training and competition program. As a participant I acknowledge that volleyball is an extreme test of a person's physical and mental limits and carries with it the potential for serious injury and great bodily harm. Players will frequently fall, contact one another, dive for balls, jump and land on the foot or other part of a player's body, and encounter numerous other injury-causing events. I hereby assume the risks of participating in the activities associated with playing volleyball for the REEF VBC. I hereby waive, release, and discharge from liability for any claims for damages for personal injury or death which arises out of or is related to my participation in these volleyball activities. As the player participant signing above is under the age of 18 and I have brought the child to this clinic, I as the **parent/guardian** of the above named child, do hereby consent to the minor's participation in this clinic and consent to the terms of the above waiver.

Parent/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_