



**CHAPEL HILL**  
*Sand*  
**VOLLEYBALL**

Office Use Only

## Player Information

<b>Player Name:</b>	<b>Gender:</b>	<b>Address:</b>	
<b>Age:</b>	<b>Grade:</b>	<b>School:</b>	
<b>League:</b> <i>Circle one.</i> Rec    6v6 Comp    4v4 Comp	<b>If Comp, Club Name:</b>	<b>Position:</b>	<b>Height:</b>

## Volleyball Experience

*Number of years played?*

<b>Sand:</b>	<b>Parks &amp; Rec:</b>	<b>Club:</b>	<b>Middle / High School:</b>
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## Contact Information

<b>Parent / Guardian:</b>	<b>Email:</b> <i>Please print clearly. Coach communication will be sent to this address.</i>		
<b>Primary Phone:</b>	<b>Secondary Phone:</b>		
<b>Secondary Parent / Guardian:</b>	<b>Primary Phone:</b>	<b>Secondary Phone:</b>	
<b>Emergency Contact:</b>	<b>Phone:</b>		

## General

<b>Shirt Size:</b> <i>Circle one.</i>	YS	YM	YL	AS	AM	AL	AXL	AXXL
<b>Medical Concerns:</b>								
<b>Special Requests / Friend Requests</b>					<b>Vacation Dates:</b> <i>Please let us know the dates your child will be unavailable during the season.</i>			

**Waiver**  
*In consideration of acceptance into the Chapel Hill Sand Volleyball League, I do hereby, for myself, executors and administrators, waive, release and forever discharge all claims for any damages, which may be sustained and suffered by the above named child in connection with his/her said association with and/or entry into games, exhibitions and/or practice sessions which may herein after occur to me against Chapel Hill Free Will Baptist Church, administrators, church officers and representatives. In further consideration for such recreation and training afforded myself and/or my child, I hereby release and discharge Chapel Hill Free Will Baptist Church, officers, coaches, assistants and appointees any and all of them, from any claims, liabilities, damages or demands for any injuries to person or property, sustained by the above named child and resulting from their participation, practice or play for the aforementioned organization. Should the above named child become ill or injured and a parent or guardian cannot be contacted, permission is hereby granted to call a licensed physician for treatment or to transport said child to a hospital emergency room for treatment. Further the undersigned will indemnify and hold harmless Chapel Hill Free Will Baptist Church, its officers, administrators, agents and all other persons, whoever, from any and every claim or demand of every kind of character, which may be asserted by reasons of any injuries or the effects of consequences thereof. I agree to abide by the written rules, policies, and spirit of the Chapel Hill Free Will Baptist Church Sports League, I acknowledge the authority of the Administrator of Sports. I further agree to abide by any decisions made by the league that are not covered in the rule or policy books. I further understand that photographs are occasionally taken of games and teams and these photographs may be used by the church in publications or on the church and league websites.*

Parent / Guardian Signature

Date