

# City of Dover Parks & Recreation VOLLEYBALL TEAM ROSTER FORM

**Team Name:** \_\_\_\_\_

**Division:** \_\_\_\_\_

**Manager's Name** \_\_\_\_\_

**Coach's Name** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

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

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

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

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

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

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

**PLAYER RELEASE AND WAIVER:** In consideration of my participation in this league, I hereby, for myself, heirs, executors, or administrators, waive and release any and all rights and all claims for damages I may have against the City of Dover, Department of Parks and Recreation, their agents, representatives, or assignees for any and all injuries which may be suffered by my participation. I agree that any photographs taken during the event shall become and remain the property of the City of Dover, and that the City of Dover shall have the right to use such photographs and/or film whenever so desired free of any claims on my behalf.

1.	First Name _____	MI _____	Last Name _____	Home Phone _____	Email _____
	Address _____		City _____	State _____	Zip _____
				DOB ____/____/____	Signature _____

2.	First Name _____	MI _____	Last Name _____	Home Phone _____	Email _____
	Address _____		City _____	State _____	Zip _____
				DOB ____/____/____	Signature _____

3.	First Name _____	MI _____	Last Name _____	Home Phone _____	Email _____
	Address _____		City _____	State _____	Zip _____
				DOB ____/____/____	Signature _____

4.	First Name _____	MI _____	Last Name _____	Home Phone _____	Email _____
	Address _____		City _____	State _____	Zip _____
				DOB ____/____/____	Signature _____

5.	First Name _____	MI _____	Last Name _____	Home Phone _____	Email _____
	Address _____		City _____	State _____	Zip _____
				DOB ____/____/____	Signature _____

6.	First Name _____	MI _____	Last Name _____	Home Phone _____	Email _____
	Address _____		City _____	State _____	Zip _____
				DOB ____/____/____	Signature _____

7.	First Name _____	MI _____	Last Name _____	Home Phone _____	Email _____
	Address _____		City _____	State _____	Zip _____
				DOB ____/____/____	Signature _____

8.	First Name _____	MI _____	Last Name _____	Home Phone _____	Email _____
	Address _____		City _____	State _____	Zip _____
				DOB ____/____/____	Signature _____

**Additional spaces on back**

***All roster information must be legible, completed in full and signed by the player, or it will not be accepted.***

**PLAYER RELEASE AND WAIVER:** In consideration of my participation in this league, I hereby, for myself, heirs, executors, or administrators, waive and release any and all rights and all claims for damages I may have against the City of Dover, Department of Parks and Recreation, their agents, representatives, or assignees for any and all injuries which may be suffered by my participation. I agree that any photographs taken during the event shall become and remain the property of the City of Dover, and that the City of Dover shall have the right to use such photographs and/or film whenever so desired free of any claims on my behalf.

9. First Name _____ MI _____ Last Name _____ Home Phone _____ Email _____ Address _____ City _____ State _____ Zip _____ DOB ____/____/____ Signature _____
--

10. First Name _____ MI _____ Last Name _____ Home Phone _____ Email _____ Address _____ City _____ State _____ Zip _____ DOB ____/____/____ Signature _____
---

11. First Name _____ MI _____ Last Name _____ Home Phone _____ Email _____ Address _____ City _____ State _____ Zip _____ DOB ____/____/____ Signature _____
---

12. First Name _____ MI _____ Last Name _____ Home Phone _____ Email _____ Address _____ City _____ State _____ Zip _____ DOB ____/____/____ Signature _____
---

***All roster information must be legible, completed in full and signed by the player, or it will not be accepted.***