SPRING VOLLEY



Rough Rider Center
Watford City, ND
Online registration available @
roughridercenter.leagueapps.com/tournaments

Team Name: _____

Coach's Name: _____

Address: _____

Phone #: _____

Email: _____

Division: (Circle) 12U 14U 16U 18U

Rate Your Team's Skill Level (circle one): 1 2 3 4 (4 is best)

Please have all parents/guardians sign the roster which acts as the player liability release:

I acknowledge that I am signing my child/ward up for an activity(ies) or program(s) run through the Watford City Park District and/or the Rough Rider Center and that there are certain risks of physical injury to participants in the activity(ies) or program(s). I agree to assume the full risk of any such injuries, damages, or loss, regardless of severity, which I, my child/ward, or any of our heirs, successors, or assigns may have against the Watford City Park District and the Rough Rider Center and its directors, employees, agents, volunteers, chaperones, or representatives resulting from participating in the activity(ies) or program(s).

I understand, acknowledge, and agree that the Watford City Park District and the Rough Rider Center, its directors, agents, employees, volunteers, chaperones, or representatives shall not be liable for any injury, up to and including death, that my minor child/ward may suffer which is incident to and/or associated with their participation with the Watford City Park District and the Rough Rider Center or through its transportation or supervision of my child/ward.

I hereby release, discharge, indemnify, and agree to hold harmless the Watford City Park District and the Rough Rider Center, its directors, employees, agents, volunteers, chaperones, and representatives free from any and all liability arising out of or in connection with my minor child/ward. For purposes of this RELEASE, liability means all claims, demands, losses, causes of action, suits, or judgments of any kind that I or my minor child, or our heirs, executors, administrators, and assigns may have against the Watford City Park District and the Rough Rider Center, its directors, employees, agents, volunteers, chaperones, or representatives for any personal, physical, or emotional, injury, accident, illness, death, or any loss of or damage to personal property that occurs to my minor child while they are participating with the Watford City Park District and the Rough Rider Center.

I understand that unless specifically stated in writing at the time of registration, photographs of participants may be taken and used for promotional purposes.

I acknowledge that I have carefully read this Agreement and Release of Liability. I am fully aware of the legal consequences of this agreement and agree to its terms and understand I am waiving certain rights and am releasing the Watford City Park District and the Rough Rider Center from all liabilities stated herein.

APRIL 17 & 18

TOURNAMENT INFO:

Divisions:
12U, 14U - Saturday
16U, 18U - Sunday

Registration Fee:
$175 per team (checks only unless registering online)

Mail in Option Form & Payment To:
Rough Rider Center
Attn: Spring Volley
PO Box 1739
Watford City, ND 58854
(Check Payable to the Rough Rider Center)

Games Played:
3 game guarantee

Deadline to Register:
April 7
No refunds after April 7 unless tournament is cancelled

For more information:
Krystal Picklesimer
Recreation Manager
krystalp@roughridercenter.com
Cell: 701-609-4004

Uniform #	Player Name:	Birthdate:	Phone #:	Parent/Guardian Signature: