

North Shore Summer League/Girls' Volleyball

Athlete's Name _____ Ph. # () _____

Address _____ City & Zip _____

Varsity team you will be playing with this summer _____

This form must be given back to your coach and returned to the league director for file

Parent/Guardian Consent Form

I hereby request that you accept this application for enrollment of the above named for the North Shore Summer Volleyball League for the summer of 2010. In consideration of the North Shore Summer Girls' Volleyball League acceptance, I release and discharge Lost Nation Sports Park, the North Shore Summer Girls' Volleyball League, any and all of its employees and supervisors, Ray Force, and any other person associated with the above named for all claims on account of all injuries which may be sustained by the participant who I enroll, while participating in the league.

I authorize the supervisors of the North Shore Summer Girls' Volleyball League to act in accordance to their best judgement at all times. In the event of an emergency, requiring medical attention, I hereby waive and release the league and any of the above named in paragraph one of any liability for injuries and illness incurred while participating in league play.

I have no knowledge of any physical impairment or disability that would affect the above named participant in the North Shore Summer Girls' Volleyball League program. I have disclosed, in writing, any such impairment or disability to a league participant.

I further understand, and have been duly informed that the North Shore Summer Girls' Volleyball League and each party mentioned does not carry any medical or accident insurance on behalf of any participant. Each party enrolling said participant is covered by a medical and accident insurance policy. I, the enrolling party, and the participant, shall be responsible for any and all negligent, willful, wanton, and malicious acts of the enrolled participant. Each participant, and her parent, guardian or person signing below shall be liable for the participant's medical and/or accident insurance and render the North Shore Summer Girls' Volleyball League and all parties mentioned above save harmless from the same.

Parent/Guardian Signature _____

Participant Signature _____