

## Waiver and Consent Form

### **Emergency Release:**

In case of an emergency (please check one):

I give, or  I do not give the City of Irving and its staff the authority to call for medical attention for my child while participating in any program, field trip or special event with the City of Irving's Spring Volleyball League or any other City of Irving park or facility.

### **Liability Release:**

By my signature on this form, I hereby release the City of Irving, its employees and volunteers from all responsibility for any accident or injury that may occur while my child participates in planned activities at any City of Irving facility, field or park. I also assume all risks inherent to this sport and do hereby release and hold harmless the City of Irving, its employees and volunteers in case of injury to my child. I hereby waive all claims against the organizers and supervisors of the said activity.

### **Photo Release:**

By my signature on this form, I authorize the City of Irving and its agents and assigns (hereinafter City of Irving) should it choose, to use my [or my child's or dependent's (as applicable)] name, picture, voice, verbal statements, and/or portraits (video or still) in any promotional and/or educational printed or electronic piece that furthers the City of Irving's public relations and/or educational efforts during this and subsequent years. This includes, but is not limited to, external news media outlets, printed materials, broadcast, website, brochures, displays, newsletters, or other means of communicating with the public about programs and services in Irving. I further understand that the pictures, recordings, articles, copy, or other means of communications may or may not personally identify me [or my child or dependent (as applicable)]. I release to the City of Irving and consent to the use of my [or my child's or dependent's (as applicable)], name, picture, voice, verbal statements, or portraits (video or still).

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

City of Irving  
Parks and Recreation Department  
Lively Pointe Youth Center  
909 N. O'Connor Road  
Irving, TX 75061

# Irving Spring Volleyball League

# 2022



A competitive league that teaches  
fundamentals and promotes teamwork

Grades 6 through 8

Call your local recreation center  
for more information  
or visit [CityofIrving.org/IrvingRec](http://CityofIrving.org/IrvingRec)

LET'S PLAY *Irving*  
PARKS & RECREATION

## League Information and Dates

This league is designed to prepare students in grades 6th to 8th to successfully try out for a middle school, high school or club level volleyball team. The league strives to teach fundamentals, teamwork and accountability, and hopes to encourage athletes with positive instruction and competitive play.

Feb. 23 -  
March 20

**League Registration**  
**Registration will be accepted**  
**at any Irving Recreation**  
**Center or online at**  
**[CityofIrving.org/IrvingRec](http://CityofIrving.org/IrvingRec)**

April 4

**Practices begin**  
**Locations TBD**

April 18 -  
May 17

**League games**

May 19 -  
May 21

**Championship Tournament**

Fee: \$35/player  
*After March 20, a \$10 late fee  
will be assessed.*



## City of Irving Volleyball League Registration Form

### **Please Print**

*Complete information below and sign the waiver on the back of this form.*

Player's First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age: \_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ ZIP: \_\_\_\_\_ Preferred method of contact: Call Email Text

Parent's Name: \_\_\_\_\_ Cellphone: \_\_\_\_\_

Parent's Email: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

Select division: 6th Grade 7th Grade 8th Grade

Select player's jersey size: **Youth:** Med. Large, or **Adult:** Small Med. Large X-Large XXLarge

Returning Player, or New Player? For returning players, please list:

Summer league team name: \_\_\_\_\_ Summer league coach's name: \_\_\_\_\_

Is the parent willing to coach? Yes No If yes, please email [tanich@cityofirving.org](mailto:tanich@cityofirving.org)

***Fee discounts available for parent coaches.***

Does the player have any health concerns? Yes No If yes, please specify: \_\_\_\_\_

Registration fee \$35. Late registration fee after March 20 \$45. Make all checks payable to City of Irving.

### **Staff Use Only:**

REGISTRATION DATE: \_\_\_\_\_ LOCATION: \_\_\_\_\_

FEE PAID \$ \_\_\_\_\_ CASH/CREDIT/CHECK # \_\_\_\_\_ RECEIPT # \_\_\_\_\_