

# OTRD Queens of the Court Spring Volleyball

(208) 678-6879 Email: jvanbiezenotrd@gmail.com



## ONE Participant PER FORM

Fee: \$40

Participants Name: \_\_\_\_\_

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Current Grade (circle one):    5<sup>th</sup>    6<sup>th</sup> \*Girls ONLY

Shirt sizes

(Circle one)

YS 6-8

YM 10-12

YL 14-16

AS

AM

AL

AXL

Parent/Guardian's Names: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mom Cell: \_\_\_\_\_ Dad Cell: \_\_\_\_\_ TXT? \_\_\_\_\_

Email: \_\_\_\_\_

Any Medical Condition we need to be aware of? \_\_\_\_\_

**AGREEMENT, WAIVER AND RELEASE:** In consideration for allowing myself to participate in the above OTRD activity, I DO HEREBY WAIVE, RELEASE AND FOREVER DISCHARGE THE OTRD, their agents and assigns from all liability, claims or demands on account of any injury to said minor or damage to or loss of property while traveling to, participating in or attendance at any OTRD activity. It is my understanding that there is no insurance coverage provided by the OTRD and ALL PARTICIPANTS ASSUME THE RISK OF ACCIDENTS, death, disability, illness, personal injury, property damage, theft, or actions of any kind which may hereafter occur including travel to and from events. I also, give permission to Oregon Trail Recreation District, sponsors, and partners to use my likeness, photo, video, name, voice, and words in the newspaper, website or appear in any public forums.

Signature \_\_\_\_\_ Date \_\_\_\_\_

(ONLY A PARENT OR LEGAL GUARDIAN MAY GIVE PERMISSION FOR A CHILD TO PLAY)

## Games will be played Saturdays in April.

### 5<sup>th</sup> Grade Schedule

April 1<sup>st</sup> - Buhl

April 8<sup>th</sup> - Murtaugh

April 15<sup>th</sup> - TBD

April 22<sup>nd</sup> - TBD

### 6<sup>th</sup> Grade Schedule

April 1<sup>st</sup> - Kimberly

April 8<sup>th</sup> - Murtaugh

April 15<sup>th</sup> - Kimberly

April 22<sup>nd</sup> - OTRD Rec Center

Cash: \_\_\_\_\_

Check #: \_\_\_\_\_

Card# \_\_\_\_\_