

READING RECREATION COMMISSION – PLAYER WAIVER

SPORT: Volleyball LEAGUE: BB or B TEAM NAME: _____

As manager, I accept responsibility for the actions of my team. I understand that any misconduct by players or myself, could result in suspension or expulsion from league for the individual or team.

CAPTAIN'S SIGNATURE: _____ DATE: _____

All players must complete information below.

Photo Waiver Consent

I grant permission for the Reading Recreation Commission to take and use photographs, slides and videotapes of me as needed for program documentation, program development and public relations.

Waiver of Liability

The undersigned in consideration of admittance to this activity does hereby for myself, my minor child, all heirs, successors, and assigns agree to release, waive, and forever discharge from all liabilities and further agree to indemnity, save and hold harmless the Reading Recreation Commission agents and employees from any loss, liability, damage, or costs which may be incurred due to participation in this activity.

Print Full Name

Signature

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

TEAM NAME: _____

Print Full Name

Signature

11. _____

12. _____

13. _____

14. _____

15. _____

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18. _____

19. _____

20. _____