

# Volleyball Sign-Ups

Welcome to the 2011-2012 CMP Sports Program for 4<sup>th</sup> – 8<sup>th</sup> graders. If you are interested in playing, please fill out all forms, and return to office by Friday, September 9<sup>th</sup>.

Practices are scheduled to begin on Monday, September 12<sup>th</sup>, at 3:15 for 4<sup>th</sup>, 5<sup>th</sup>, and 6<sup>th</sup> graders and Middle School practice will begin on Tuesday, September 13<sup>th</sup>, at 3:30. Practices will be 1 hour.

We are requesting a one time fee of \$20.00 to assist us with the cost of team t-shirts, gymnasium rental, and end of the season awards.

---

Player(s) name \_\_\_\_\_  
\_\_\_\_\_

Player(s) contact number \_\_\_\_\_

Player(s) grade and class \_\_\_\_\_  
\_\_\_\_\_

Shirt size(s) Youth: medium \_\_\_\_\_ large \_\_\_\_\_ XL \_\_\_\_\_

Adult: small \_\_\_\_\_ medium \_\_\_\_\_ large \_\_\_\_\_  
XL \_\_\_\_\_

\*if you have a team shirt from a previous season that still fits, and you want to continue using, deduct \$8.00 from total.



Volleyball

Registration Form, Release of Liability and Assumption of Risk Agreement

Participant's Name	Birthdate	Address	City, Zip Code	Home Telephone

Activity: \_\_\_\_\_ Date(s): \_\_\_\_\_  
 Class/Teacher: \_\_\_\_\_ Location: \_\_\_\_\_

**AGREEMENT, WAIVER, AND RELEASE**

In consideration for being permitted by the California Montessori Project Charter School (hereinafter CMP) to participate in the above activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death or property damage which I or my child may have, or which hereafter may accrue to me or my child, as a result of participation in said activity. This release is intended to discharge in advance the California Montessori Project (CMP), its officers, employees, and agents, from and against any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons and CMP (or its officers, employees, or agents). It is understood that this activity involves an element of risk and a danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and hold the above persons and entities free and harmless from any loss, liability, damage, cost, or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said activity.

**PARENTAL CONSENT: (to be completed and signed by parent/guardian if participant is under 18 years of age)**

I hereby consent that my son/daughter, participate in the above activity, and I hereby execute the above waiver, agreement, and release in his/her behalf. I state that said minor is physically able to participate in said activity. I hereby agree to indemnify and hold the persons and entities mentioned above free and harmless from any loss, liability, damage, cost, or expense which they may incur as a result of the death or any injury or property damage that said minor may sustain while participating in said activity.

I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE CALIFORNIA MONTESSORI PROJECT AND I SIGN IT OF MY FREE WILL.

Parent/Legal Guardian (Please print) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_  
 \*\*\*\*\*

Participants and parents/legal guardians hereby agree to abide by all rules, regulations and policies of CMP; and to follow the instructions of the CMP staff in charge of this activity.

Parent/Legal Guardian Signature \_\_\_\_\_ Student Signature #1 \_\_\_\_\_ Date \_\_\_\_\_

Student Signature #2 \_\_\_\_\_ Student Signature #3 \_\_\_\_\_ Date \_\_\_\_\_