

Holladay - Lion's Fitness and Recreation Center

Spike the Heights



DATE: Saturday, May 30, 2009
WHERE: Cottonwood Heights
 Recreation Center Grass Fields
 7500 South 2700 East
TIME: Play begins at 9:00 a.m.
DIVISION: Men's and Women's Doubles
 Open, A, AA, B, and Novice

Grass Doubles Volleyball Tournament

Pre - Registration

UOVA Member	\$15.00
Non-UOVA Member	\$25.00

T-Shirt included.
 Check-in from 8:30 a.m. - 8:45 a.m.
 at the pre - registration table under pavilion.

Day of Registration

UOVA Member	\$20.00
Non-UOVA Member	\$30.00

Shirts available-until we run out.
 Registration will begin at 8:00 a.m. and will end at 8:45 a.m.
 under pavilion.

Pre - Registration Deadline: Friday, May 29, 2009 at 12:00 p.m.

For more information or to register, please contact:

Please make checks payable to Salt Lake County Parks and Rec.

IN PERSON OR MAIL:
 Holladay-Lions Fitness & Recreation Center
 1661 East Murray Holladay Road
 Holladay, Utah 84117
(801) 943-1638, ask for Mike
 Monday-Friday 5:30 a.m.-9:30 p.m..
 Saturdays 7:00 a.m.-6:00 p.m.
 Sundays 10:00 a.m.-3:00 p.m.
 (MasterCard/Visa accepted)

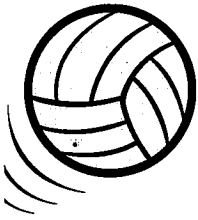


ONLINE REGISTRATION:
 Register online at:
www.activityreg.com
 THERE IS A \$2.00 INTERNET FEE

CANNOT REGISTER OVER THE PHONE!



Spike the Heights Registration Form



Please Mark the Appropriate Box

Check League: **Women's** **Men's**
Check Division: ***Open*** **AA** **A** **B** **Novice**
Check Shirt Size: **Small** **Medium** **Large** **X-Large**
Open Division will play on grass fields

Player #1 _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

E-mail Address _____

UOVA Number _____

Player #2 _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

E-mail Address _____

UOVA Number _____

Emergency Contact (other than players) _____ Phone _____

Are there any injuries or conditions that our staff should be aware of? Yes No

If yes, please explain _____

Parental Statement of Agreement—Assumption of Risk, Liability Release, Indemnification and Refund Policy

- Release and Indemnification:** I hereby recognize and acknowledge that my child's participation in recreational activities may involve bodily injury and/or emotional injury to myself and/or my child. In consideration of my child being permitted to participate in such events. I for myself, my child, my heirs, my executors and administrators, hereby voluntarily and knowingly indemnify and hold harmless, defend, release, waive and discharge Salt Lake County, and its officers, employees and volunteers from any and all suits, claims or liability, including negligence, based on any injury except that caused solely by the misconduct of Salt Lake County, that may result from my child's participation in Salt Lake County Parks & Recreation activities. In addition, I agree that I or my insurance company will pay for medical, hospitalization or any other expenses resulting from my child's participation.
- Refund Policy:** As per Salt Lake County policy and procedures, the Parks & Recreation Division may withhold 25% of the refund (program registration fee) for administrative costs. All refunds must be requested in person, accompanied with a written refund request. No refunds shall be given after the first day of the program.
- Collections:** I agree to pay Salt Lake County all costs incurred together with reasonable attorneys fees in the event that my account is referred to the Salt Lake County Attorney's Office for collection. I understand that any account delinquent 30 days or more will be turned over to the Salt Lake County Attorney for collection.
- Emergency Treatment:** I hereby authorize Salt Lake County Parks & Recreation program staff to act on my behalf in accordance with their best judgment in case of an emergency involving my child, and agree to assume full responsibility for all expenses, medical or otherwise, that may arise therefrom. I understand that I or my insurance company will pay for such emergency treatment.
- Equal Opportunity:** Salt Lake County Parks & Recreation provides equal opportunity to participate regardless of race, creed, gender, or ability to pay, and will, upon request, provide, reasonable accommodations to individuals with disabilities.
- By signing this assumption of risk, liability release, indemnification and refund policy statement, I acknowledge that I have read its contents and disclosure, that I understand its contents and disclosure, and agree to its terms

Signature (if under 18, Parent or Legal Guardian) _____ Date _____

OFFICE USE ONLY. . . Receipt No.	Amt.	Date	By
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