

Farmington City-Adult Volleyball

Coach: _____

League: _____

Team Name: _____

Phone: _____

PLEASE READ BEFORE SIGNING

I, hereby recognize and acknowledge that participation in recreation activities may involve bodily injury and emotional injury to myself and others. In consideration of participating in Farmington City Recreation sponsored activities, I hereby voluntarily and knowingly execute this release with the intent of binding myself and any others having interest, and o hereby expressly release, waive, and discharge Farmington City, its officers and employees, from all liability or claims therefore resulting from myself in the above-referenced recreation activity.

I hereby authorize Farmington City Recreation staff to act on my behalf in accordance with their best judgment in the case of an emergency and do agree to assume full responsibility for all medical expenses that may arise there from.

By signing this document, I acknowledge that I have read its content and disclosures, that I understand them, and that I agree to the terms hereof. I further acknowledge that this release is intended to be as broad and as inclusive as may be permitted by the laws of the State of Utah, and that if any portion here from is found to be invalid, it is agreed that the balance shall continue in full force effect.

Player's Name	Email address	City	Phone	Signature	1 st GAME DATE	2 ND GAME DATE

- To play in the Adult Volleyball Leagues ALL participants MUST be 18 years of age or older. There are no exceptions to this RULE
- PLEASE be sensitive to the social distancing when you can. We ask that you limit your fan base to a minimum and when at all possible leave your little ones at home. There is NO add'l gym space available for activities for those not participating.