



Team Waiver Adult Volleyball 2025



Team Name _____

Captain Name _____

I _____ understand that it is my responsibility, as captain of the team, to see that each team member understands and abides by the league rules and the player code of conduct. I hereby affirm that each player participating on this team has read the personal release statement below and signed his/her name.

**** ALL PLAYERS PLEASE NOTE:** Signature indicates that you have read the information printed below.

PERSONAL RELEASE STATEMENT: I understand that the registered activities and services may have an element of hazard or inherent danger and I take full responsibility for my actions and physical condition. I agree to release, indemnify and hold Provo City Corporation, its employees, sponsors, and volunteers from any liability, loss, cost or expense (including attorney's fees, medical and ambulance costs) that I may incur while participating in Parks and Recreation Activities. I give permission to use my photograph to publicize Provo City programs and services.

	Name	Phone	Signature	Conduct Violations
1				/
2				/
3				/
4				/
5				/
6				/
7				/
8				/
9				/
10				/
11				/
12				/
13				/

14				/
15				/