



FOR YOUTH DEVELOPMENT®  
 FOR HEALTHY LIVING  
 FOR SOCIAL RESPONSIBILITY



# Adult Co-Ed Volleyball League

Gather your friends and stay fit together with a little friendly, fun competition. Emphasizing teamwork, volleyball at the Y offers recreation and skill development for adults 18 and older. Games are played 6 versus 6.

**Season:** Thursdays - DEADLINE 10/20/2022  
**Begins:** 10/27/2022  
**Team Fee:** 6 Week Season + Single Elimination Tourney \$350 (No individual registration accepted.)

**Team Name:** \_\_\_\_\_

**Team Captain:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**TEAM MEMBERS:**

- 1. \_\_\_\_\_ **Phone:** \_\_\_\_\_
- 2. \_\_\_\_\_ **Phone:** \_\_\_\_\_
- 3. \_\_\_\_\_ **Phone:** \_\_\_\_\_
- 4. \_\_\_\_\_ **Phone:** \_\_\_\_\_
- 5. \_\_\_\_\_ **Phone:** \_\_\_\_\_
- 6. \_\_\_\_\_ **Phone:** \_\_\_\_\_
- 7. \_\_\_\_\_ **Phone:** \_\_\_\_\_
- 8. \_\_\_\_\_ **Phone:** \_\_\_\_\_
- 9. \_\_\_\_\_ **Phone:** \_\_\_\_\_
- 10. \_\_\_\_\_ **Phone:** \_\_\_\_\_
- 11. \_\_\_\_\_ **Phone:** \_\_\_\_\_
- 12. \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Waiver,** In consideration of my participation in the activities of the YMCA OF VINCENNES, I do hereby agree to hold free from any and all liability the YMCA OF VINCENNES, Board Members, representing officers, employees, volunteers and members and do hereby for myself, my heirs, executors and administrators, waive, release and forever discharge any and all rights and claims for damages or injuries which I or my child may have or which may hereafter accrue to me or my child arising out of or connected with me or my child participating in any of the activities of the YMCA OF VINCENNES. I hereby do declare my child to be physically sound to participate in the activities at the YMCA OF VINCENNES. Pictures taken during activities at the YMCA OF VINCENNES may be used for marketing purposes. I understand this specific release may be revoked at any time by written request. To the best of my knowledge, the information on this form is complete and accurate. I have read and agree to these terms and conditions.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

To learn more, contact Kenny Noel, 812 895 9622 or youthsports@vincennesymca.org

