

Wahoo Parks and Recreation Department  
**2025 WINTER 4-ON-4 COED VOLLEYBALL LEAGUE**

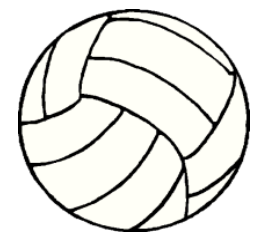


**When:** Thursday nights starting in January with tournament ending in or before March. League schedule will be posted to our website by 2pm on January 2<sup>nd</sup>. Visit [www.wahooparksandrec.com](http://www.wahooparksandrec.com)

**League Format:** Teams must be composed of at least two women on court at all times. League will use a modified, narrowed court. No "female contact rule" will be used and all players are eligible attackers. League will be self-officiated and teams will play four matches plus a double elimination tournament (guaranteed 6 or more games total). Teams may play doubleheaders. Matches will be held primarily between 6pm-9pm. Requested game times must be noted on this form. Not all requests may be accommodated. Team managers are responsible for reporting scores and a 50-minute limit will be used to ensure games stay on time.

**Registration Deadline (w/payment):** December 20<sup>th</sup> or until the league limit of 6 teams is met.

<b>League Fees:</b>	<u>Civic Center Member</u>	<u>Non-Member</u>
	(More than 1/2 the team are CC members)	(Less than 1/2 the team are CC members)
Competitive	\$110 plus tax	\$135 plus tax



**League Director:** Bob Schmidt, 443-4174, [schmidt@wahoo.ne.us](mailto:schmidt@wahoo.ne.us)

**TEAM REGISTRATION FORM & PLAYER INDEMNIFICATION AGREEMENT**

Realizing that I am playing for fun, recreation, and personal betterment, I hereby for myself, my heirs, personal representatives and assigns, waive and release any and all claim for injuries or damages of any kind of nature which I may have against the City of Wahoo, any manager, referee or assistant thereto, anyone who prepares a facility for any game, chaperones, sponsors or anyone who organizes or causes this program to operate, their agents, representatives and assigns as a result of any practice session or game or any participating in said sports program and indemnify the City of Wahoo, and all parties named herein against such claim or damages arising from such claims.  
 I hereby agree that managers, referees, their assistants or anyone who prepares a facility shall not be liable for my injury or death as a participant in said Wahoo Parks and Recreation program which results from the negligence of any of the above listed individuals. I understand that the City of Wahoo assumes no legal or financial responsibility in case of accident or injury and I assume full responsibility for my medical expenses and waive all rights or causes of action, which I may have against the City of Wahoo and each of the persons named herein.

2025 WINTER 4-ON-4 COED VOLLEYBALL LEAGUE

Participant	Address	Phone #	Signature
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____
7. _____	_____	_____	_____

Team Manager: \_\_\_\_\_ Team Name/Sponsor: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Parks and Recreation Hot Line (game cancellations) **443-4500**  
 Web site (league info and game cancellations) **[www.wahooparksandrec.com](http://www.wahooparksandrec.com)**  
 Wahoo Parks and Recreation **443-4174**

*FOR OFFICE USE ONLY*

Date Pd. \_\_\_\_\_ Cash  Check  Chk. # \_\_\_\_\_ Credit Card  Amount Pd. \_\_\_\_\_ Staff Member \_\_\_\_\_