Wahoo Parks and Recreation Department

2025 FALL WOMEN'S 3-ON-3 VOLLEYBALL LEAGUE

When: Tuesday and Monday nights starting in October with tournament ending in or before December. Tuesday nights will be the primary game night. Teams that wish to play primarily on Monday nights please note on this form. League schedule will be posted to our website by 2pm on October 2nd. Visit www.wahooparksandrec.com.

League Format: 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 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): September 29th. ***Registrations received after September 29th will be accepted on an "as needed" basis and will be charged a $20 late fee.***

League Fees:

Civic Center Member	*Non-Member*
(More than ½ the team are CC members)	(Less than ½ the team are CC members)
$120**	$145**

*****fee represents the total amount due w/taxes***

League Director: Bob Schmidt, 443-4174, 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.

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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**

Wahoo Parks and Recreation **443-4174**

FOR OFFICE USE ONLY

Date Pd. _____ Cash ☐ Check ☐ Chk. # _____ Credit Card ☐ Amount Pd. _____ Staff Member _____