



ROCK THE BLOCK VOLLEYBALL TOURNAMENT

**COED VOLLEYBALL TOURNAMENT FOR STUDENTS
IN GRADES 6 -8 (2 Boys minimum per team)
TEAM ENTRY FEE: \$120 (Includes t-shirt & trophies for champions)
APRIL 24, 2010: STARTING AT 8AM**

TEAM NAME: _____ **TEAM CONTACT #:** _____ **EMAIL** _____

NAME: _____ **GRADE:** _____ **PHONE #** _____ **EMAIL** _____

T-SHIRT SIZE: (YL, AS, AM, AL, AXL)

PARENT SIGNATURE (READ WAIVER BELOW) _____

NAME: _____ **GRADE:** _____ **PHONE #** _____ **EMAIL** _____

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T-SHIRT SIZE: (YL, AS, AM, AL, AXL)

PARENT SIGNATURE (READ WAIVER BELOW) _____

WAIVER

I, the above signed parent, enrolling with the tournament, understand that my son/daughter in attending the tournament and using the facilities does so at his/her own risk. The tournament and its agents and tournament sponsors shall not be liable for any damage whatsoever arising from any personal injury or property loss sustained by participant and his/her family in or about the premises. Participants assume full responsibility for all injuries and damages which may occur in or about the premises and he/she does hereby fully and forever release, discharge and hold harmless the tournament, all facilities, and its agents and tournament sponsors from any and all claims, demands, damages, right of action, present or future resulting from or arising out of any person's participation in the tournament or its facilities. Furthermore, I understand that if my team is not accepted, the entree fee will be returned in full. In the event of inclement weather, shortening or canceling this event, entry fees will not be returned. **CONSENT:** I hereby grant authority to the tournament to render judgment concerning medical assistance or hospital care in the event of an accident or illness.

RETURN FORM TO ST ANN'S BY APRIL 5TH

For more information contact Veronica White 901.218.0476/veronicawhite@amromusic.com