



Women's Spring 4v4 Volleyball Roster (2024)

Registration Deadline: March 13 (Roster = 5 player min.)

All sponsor & player fees MUST BE PAID IN FULL when team registration is submitted to DPR or it will not be accepted! It is the Team Manager's responsibility to collect all fees ahead of time and submit them as one team registration. DO NOT tell players to stop at DPR to pay.

Check the proper league level at which you feel your team would be competitive. (#1 IS TOP LEAGUE)

LEVEL >>

1

2

3

4

5

6

Team:

Manager:

Cell Phone

Alt. Phone

E-mail Address:

Mailing Address:

City

State

Zip

I, and all my executors, administrators hereby waive and release any and all rights and claims against the Dickinson Parks & Recreation District, Dickinson Public & Catholic Schools, Dickinson State University, and all those associated with this program from any liability for injuries which may occur while participating in this program.

| OFFICE USE ONLY | | PLAYER'S NAME | | ADDRESS | City | PHONE (cell #) | SIGNATURE | AGE | T-SHIRT SIZE |
|-----------------|-------|---------------------------------|--|---------|------|--|-----------|-----|-----------------|
| | \$45 | 1) | | | | | | | |
| | \$45 | 2) | | | | | | | |
| | \$45 | 3) | | | | | | | |
| | \$45 | 4) | | | | | | | |
| | \$45 | 5 | | | | | | | |
| | \$45 | 6 | | | | | | | |
| | \$45 | 7 | | | | | | | |
| | \$45 | 8 | | | | | | | |
| SPONSOR > | \$125 | Total Fees Paid @ Registration: | | | | PACKET RECEIVED BY (DPRD Employee initials): | | | |
| NOTES: | | | | | | | | | |