

Marv Jenson Fitness & Recreation Center

Summer Volleyball

WHAT:

Recreational Coed Volleyball. Players learn the rules and basic skills of volleyball with an emphasis on fun and sportsmanship. This is not a competitive program.

LEAGUES:

3rd/4th grade, 5th/6th grade, 7th-9th grade



REGISTRATION:

Registration deadline is May 15th; Late registration until May 22nd (\$5 late fee)
Register online at www.activityreg.com or in person at Marv Jenson Rec Center

SEASON:

June 10th through July 15th

One game and one practice per week

All games will be played on Saturdays. Practices times are available and Mon, Wed, and Friday – times/specific days will be determined by the coaches.

FEES:

\$36.00 – Includes weekly practices, 6 games, volleyball jersey, and participation award

COACHES:

We need parent volunteers to coach all of our volleyball teams. Please indicate on your child's registration form that you are willing to coach if you can do so.

Parents who coach a team and complete online coaches training are eligible to receive 50% off a future registration!

Coaches Meeting: May 30th @ 6:00pm at Marv Jenson Rec Center

PARENTS:

All team assignments and schedules will be posted on the Marv Jenson website **Tuesday May 30th**, Please check the website for your child's team information so that they do not miss organization day, practices, etc.

QUESTIONS:

Call 385-468-1630 or email mwood@slco.org

10300 S Redwood Rd, South Jordan, UT 84095

385-468-1630, <http://www.slco.org/recreation/marvjenson/youthSports/volleyball.html>



For inclusion opportunities for people with disabilities, contact Ashley at 385-468-1520 or ahaddow@slco.org

MARV JENSON RECREATION & FITNESS CENTER REGISTRATION FORM

WE NEED COACHES!

I would like to volunteer as a coach!

Coach Name: _____

Coach Phone: _____

LEAGUE DIVISION:

3rd/4th Grade

5th/6th Grade

7th -9th Grade

NOTE: If there are not enough participants, age groups will be combined.

Name of Player: _____ Boy Girl

Birthdate: _____ Age: _____ Grade: _____

Address: _____ City: _____ State: _____ Zip: _____

Parent/Guardian: _____

Day Phone: _____ Evening Phone: _____ Cell Phone: _____

In Emergency Notify (other than parent/guardian): _____ Emergency Phone: _____

What school does the player attend: _____

Teammate/Coach Request: _____

Would you like to receive email updates? If yes, please provide email address: _____

Parental Statement of Agreement – Assumption of Risk, Liability Release and Refund Policy

Assumption of Risk: I hereby acknowledge and agree that my child's participation in recreational activities involves inherent foreseeable and unforeseeable risks and hazards which may expose my child, or me, to illness, injury, or death. In consideration of my child's participation in such activities, I for myself, my child, my heirs, my executors and administrators, freely and voluntarily agree to assume and accept any and all risks to my child or myself associated with my child's participation in Salt Lake County recreational activities.

Release: In consideration of my child's participation in the Salt Lake County recreational activities, I, for myself, my child, my heirs, my executors and administrators hereby release Salt Lake County and its officers, agents, and employees from any cause of action, claim, or demand of any nature whatsoever I or my child may now have, or have in the future, against Salt Lake County on account of personal injury, property damage, death, or accident of any kind, caused by, arising out of, or in any way related to my child's participation in Salt Lake County recreational activities.

Indemnification: In consideration of my child's participation in the Salt Lake County recreational activities, I agree to indemnify and hold harmless County, its officers, agents, and employees from any and all causes of action, claims, demands, losses, or costs of any nature whatever cause by, arising out of, or in any way related to my child's participation in the Salt Lake County recreational activities. I agree that my duty to defend and indemnify the County under this Agreement includes all attorney fees, litigation and court costs, expert witness fees, and any sums expended by or assessed against the County for the defense of any claim or to satisfy any settlement, arbitration award, or verdict paid or incurred on behalf of the County arising out of or in any way related to my child's participation in the Salt Lake County recreational activities.

Refund: Refunds may only be requested in person and must be accompanied by a written request. As per Salt Lake County policy and procedures the Parks and Recreation Division may withhold 25% of the refund (program registration fee) for administrative costs. No refunds shall be given after the first day of the program.

Collections: I agree to pay Salt Lake County all costs incurred, together with reasonable attorney's fees in the event that my account is referred for collection. I understand that any account delinquent 30 days or more will be turned over to collection.

Emergency Treatment: I hereby authorize Salt Lake Parks and Recreation program staff to act on my behalf in accordance with their best judgment in case of an emergency involving my child, and agree to assume full responsibility for all expenses, medical or otherwise, that may arise therefrom.

Equal Opportunity: Salt Lake County Parks and Recreation provides equal opportunity to participate regardless of race, color national origin, sex, pregnancy, sexual orientation, gender identity, marital status, religion, age, genetic information, military or veteran status, and will upon request, provide reasonable accommodations to individuals with disabilities.

Name Posting: Unless otherwise indicated below, Salt Lake County is authorized to post or publish the name of my child participating in Salt Lake County recreational activities on the Salt Lake County website. I do not authorize Salt Lake County to post or publish the name of my child participating in Salt Lake County recreational activities on the Salt Lake County website.

By signing this assumption of risk, liability release, and refund policy statement, I acknowledge that I have read its contents and disclosure, that I understand its contents and disclosure, and that I agree to its terms. If any portion of this Agreement is held to be invalid by a court of law, then it is agreed and intended that all the remainder shall, notwithstanding, continue in full force and effect.

Signature (Parent or Legal Guardian): _____ Date: _____

OFFICE USE ONLY– Receipt #:

Amt:

Date:

By: