



Women's 3x3 Volleyball League

League will be played Sunday evenings. October 8th to December 10th

Registration form and \$30 fee are due to the Village office by October 4th. Make checks payable to the Village of Dorchester.

Team Name: _____ Team Captain: _____

Phone: _____ E-mail: _____

Mailing Address: _____

Players: _____

~Participant's may not be currently enrolled in high school.

I (we) recognize and understand the activities that I (we) have enrolled in and will participate in, and do hereby give my permission and consent for participation in this program. I (we) do hereby absolve, release and agree to hold harmless the Village of Dorchester & Dorchester Public School, and all of their employees from all claims on account of any injuries which may be sustained by myself and or team while participating in any Village sponsored activity. If medical attention is required for injury or illness I (we) give permission for such medical care.

Team Captain Signature: _____ Date: _____