

# HOG CABIN VOLLEYBALL ROSTER FORM



SUNDAY [ ] CO-ED 6's "B" [ ] CO-ED 6's "C"  
 MONDAY [ ] CO-ED 6's "B" [ ] CO-ED 6's "C"  
 TUESDAY [ ] OPEN 4's "A" [ ] OPEN 4's "B"  
 WEDNESDAY [ ] CO-ED 6's "B" [ ] CO-ED 6's "C"  
 THURSDAY [ ] CO-ED 4's "A" [ ] CO-ED 6's "B"  
 FRIDAY [ ] CO-ED 6's "B" [ ] CO-ED 6's "C"

"A"--(Advanced) "B"--(Intermediate) "C"--(Recreational)

TEAM NAME: \_\_\_\_\_ [ ] CHECK IF NEW TEAM

TEAM MANAGER: \_\_\_\_\_ [ ] RETURNING TEAM

ADDRESS: \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_

PHONE#: \_\_\_\_\_ E-MAIL \_\_\_\_\_

FINAL REGISTRATION DEADLINE IS SUN. APRIL 24<sup>TH</sup>—**FRI. APRIL 22<sup>ND</sup> FOR RETURNING TEAMS**  
 LEAGUES WILL START ON MAY 9<sup>TH</sup> (**LEAGUE FEES --- \$120.00 PER TEAM**)

### TEAM ROSTER – (ALL REGULAR PLAYERS LISTED FIRST)

NAME ADDRESS PHONE#

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. **SUB** \_\_\_\_\_
8. **SUB** \_\_\_\_\_
9. **SUB** \_\_\_\_\_
10. **SUB** \_\_\_\_\_
11. **SUB** \_\_\_\_\_
12. **SUB** \_\_\_\_\_

WE, THE PLAYERS OF TEAM, \_\_\_\_\_ HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS THE HOG CABIN AND ITS EMPLOYEES FROM ANY LIABILITY FOR CLAIMS OF BODILY INJURY, OR ANY OTHER CLAIMS WHATSOEVER THAT WE MAY INCUR AS A RESULT OF ACTIVITIES ON OR AROUND HOG CABIN SAND COURTS.