



OTTAWA COMPETITIVE VOLLEYBALL LEAGUE – PLAYER WAIVER FORM

Participant Personal Information

Full Name: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City Prov. Postal Code

Home Phone: () _____ Work Phone: () _____

Mobile #: () _____ Fax: () _____

E-mail Address: _____

Birth Date: _____ Year First in League: _____
Note: DOB & Year first in league are used for statistical purposes only
Participants under 18 years of age require a parent's or guardian's consent

Team Section

Division: Men's Women's Mixed Team Name: _____

In order to spare for a team, you may not be on any other team's roster in that division. You may only spare for a team twice. The third time you must be added to the team's roster and cannot play for any other team in that division. **You may only spare for 1 team per night. You must complete a new registration/waiver form each night you spare.**
Are you sparing for the team? Yes No

This is your ____ time playing with this team this season: 1st 2nd 3rd

Do you wish to be added to this team's roster? Yes No

In consideration of my participation in activities or events organized by the Ottawa Competitive Volleyball League (hereinafter referred to as "OCVL"):
- I agree to abide by all the rules and regulations of the OCVL, and I hereby release and waive any and all claims, demands, causes of action of any nature and kind that I may have against the OCVL and any of its servants, agents, employees, directors, officers, games officials, volunteers and representatives (hereinafter collectively referred to as the "Releasees") howsoever arising, as a result of my participation in, or attendance at any event or activity organized by the OCVL.
- I am aware of the possible risks, dangers and hazards associated with the sport of volleyball and the possible risk of severe or fatal injury to myself or others, as a result of my participation, and I freely accept and fully assume all such risks and dangers.
I agree to release the Releasees from any and all liability for death or any loss, damage, injury or expense that I may suffer, or that my next of kin may suffer arising from my participation in any event or activity organized by the OCVL.
- I indemnify and will keep indemnified the Releasees against all costs, losses or damages to property of, or personal injury to, any third party, arising from or in relation to my attendance at or participation in any event or activity organized by the OCVL.
- I understand that this agreement is binding upon my heirs, next of kin executors, administrators, assigns and representatives in the event of my death or incapacity; that I have read this agreement and I understand its content; and that by signing it I am waiving certain legal rights which I or my heirs, next of kin, executors, administrators and assigns may have against the Releasees.
By completing and signing this form, I, declare that I understand and agree to the terms and conditions of the waiver outlined above.

Player's Signature Date

Parent / Guardian Consent (please print & sign)
I, _____ hereby grant _____ permission to participate in the OCVL. I accept and agree to all the rules and responsibilities outlined in this waiver on their behalf. _____
Signature Date