

**I Play Volleyball Registration & Release Form - Spring 2020 IPV Central (State College)**  
**(I Play Volleyball is a division of Get Active! Inc.)**

Participant's Name: \_\_\_\_\_  
Parents'(Guardians) Names \_\_\_\_\_  
Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Parent's Cell Phone(s) \_\_\_\_\_  
Parent's Email: \_\_\_\_\_ Participants Date of Birth \_\_\_\_\_ Grade \_\_\_\_\_  
Shirt Size-Circle One: **Child Sizes-** S, M **Adult Sizes-** S, M, L, XL, XXL (Adult S=Child L)

Alternate Emergency Contact Information (if parents are not reached)

Name: \_\_\_\_\_  
Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Is Get Active!, Inc. authorized to approve medical treatment? Yes \_\_\_ No \_\_\_

Is the participant covered by personal/family medical insurance? Yes \_\_\_ No \_\_\_

If yes, name of insurer: \_\_\_\_\_ Policy or Group number: \_\_\_\_\_

**Program Registration** – Please select the program for which you are registering and enclose the appropriate registration fee, payable to Get Active! Inc. Along with your completed registration form.

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\_\_\_ **1<sup>st</sup>-3<sup>rd</sup> Grade Skills "League" (Co-ed)- \$85** 5-6:30pm – C3 Sports  
\_\_\_ **4<sup>th</sup>-8<sup>th</sup> Grade League (Co-ed)- \$99 - MONDAYS** - 6:30-8:30pm C3 Sports  
\_\_\_ **6<sup>th</sup>-8<sup>th</sup> \*Grade Boys - \$99 – TUESDAYS** 6:30-8:30pm C3 Sports

Parents: I am interested in helping as (circle one) Coach Asst Coach Scorekeeper Referee Other  
Please list your experience as related to volleyball or other sports \_\_\_\_\_

**Family Discount:** \$10 discount for 2nd and additional children with full payment for oldest child. Refund policy: From program start through week 1: Partial refund (we retain \$30). After start of week 2: No refunds. We must be notified before the start of week 2 for you to receive a refund.

**Late registrants: Must pay full season rate regardless of starting date.**

**Late registrants:** Must pay full camp rate regardless of starting date.

\*Please do not let cost prevent your child from participating. Please contact us if you need financial assistance to participate.

In order to participate in sports clinics, camps, leagues or other related activities with Get Active! Inc. all participants must have a completed release form on file. If the participant is a minor the form must be completed and signed by a parent or guardian. Once completed and returned the participant may participate in all Get Active! Inc. sponsored volleyball clinics, camps, leagues and other related activities throughout the calendar year.

By signing below, the participant (or parent/guardian if participant is a minor) acknowledges and accepts the risks of physical injury associated with participation in the activity described above. Except for gross negligence on the part of the sponsor, the participant (or parent/guardian) accepts personal financial responsibility for any bodily or personal injury sustained during the activity. Further, the participant (or parent/guardian) promises to hold harmless the sponsoring organization and its representatives for any injury related to the activity. If a dispute over this agreement or any claim for damages arises, the participant (or parent/guardian) agrees to resolve the matter through a mutually acceptable arbitration process.

I agree to allow Get Active! Inc. to utilize photographs or any likeness of my child created from their participation in Get Active! Inc. and/or I Play Volleyball events or programs, without my approval in advance of such use, and without financial or other compensation due me. Promotional materials may include but are not limited to newspaper articles, brochures, fliers, videos, DVDs and/or our web-site.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Participant or Parent/Guardian if participant is a minor)

Please complete this registration/release form and submit it with payment in full to: **Get Active! Inc., 1228 Charles St., State College, Pa 16801.**