

FRONTIER DAYS TEEN VOLLEYBALL TOURNAMENT

SATURDAY, JULY 6, 2024

REGISTRATION FORM

ENTRY DEADLINE - JUNE 28

TEAM NAME _____ PHONE: _____

TEAM CONTACT NAME: _____ PHONE: _____

CIRCLE ONE: HIGH SCHOOL MIDDLE SCHOOL

CO-ED TEAMS OF 6-10 PEOPLE. MUST HAVE AT LEAST 2 GIRLS

WAIVER AND REGISTRATION

In consideration of my registration being accepted in the Frontier Days Teen Volleyball Tournament, I, intending to be legally bound, do hereby, for myself, my heirs, my executors and assigns, release and forever discharge any and all rights and claims for damages I may hereafter accrue to me against Frontier Days, Inc., Arlington Heights Park District, the Village of Arlington Heights, its or their respective officers, agents, representatives, volunteer organizers, volunteer staff members, successors, assigns, and sponsors for any and all damages which may be sustained and suffered by me in connection with my association with, entry, or participation in the Frontier Days, Inc., Teen Volleyball Tournament.

Player #1: Name: _____ Address: _____

Birth Date: _____ Parent Signature: _____

Player #2: Name: _____ Address: _____

Birth Date: _____ Parent Signature: _____

Player #3: Name: _____ Address: _____

Birth Date: _____ Parent Signature: _____

Player #4: Name: _____ Address: _____

Birth Date: _____ Parent Signature: _____

Player #5: Name: _____ Address: _____

Birth Date: _____ Parent Signature: _____

Player #6: Name: _____ Address: _____

Birth Date: _____ Parent Signature: _____

Teams with more than 6 players may complete 2 forms. No player may participate without parent's signature. **Please email completed form to frontierdays.org** or take to Festival office at Recreation Park between June 24-28. Any questions, call 847-577-8572.