



Churchill County Parks & Recreation

Women's Volleyball

Team Name: _____ Team Captain: _____

Mailing Address: _____

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

I, the undersigned, agree to hold Churchill County Parks & Recreation, City of Fallon, and its representatives and all those assistants involved in the Women's Volleyball League, harmless and free from all liabilities or suits, claims, or demands of every kind and character arising out of and in connection with the program provided by Churchill County. I further certify that I have no ailment or organic defect that would make participation in this activity dangerous to my health. I understand that this type of physical activity may lead to certain types of injuries including, but not limited to, strains, sprains, bruises, broken bones, and cardiac emergencies. I also understand that due to the nature of this program I may be included in photos or video that will be used for media information or advertising of future programs. I understand by signing below that I authorize the use of any photos or video taken during this program.

NOTE: If my child(ren) or any family member attend these games, I am fully responsible for their actions and any injuries that may occur during this time.

I grant permission to the Churchill County Parks and Recreation Department staff, and/or trained emergency medical professionals to provide emergency medical care and hereby agree to pay for such emergency care.

I agree to and fully understand all of the above.

Printed Name & Signature	Mailing Address & E-Mail Address	Emergency Contact
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

All players' signatures are required BEFORE playing the first game. No signatures, no games – NO EXCEPTIONS!



325 Sheckler Road Fallon, NV 89406 (775) 423-7733 (775) 423-7734 Fax

Sports Player Code of Conduct

1. NO PLAYER SHALL: at any time lay a hand upon, shove, strike or threaten an official. Officials are required to immediately suspend the player from further play and report to Recreation Supervisor. Such player shall remain suspended until his case has been considered by the Recreation Supervisor.
2. NO PLAYER SHALL: refuse to abide by official's decision. Officials are required to immediately suspend the player from further play and report such player to the Recreation Supervisor. Such player shall remain suspended until the case has been considered by the Recreation Supervisor.
3. NO PLAYER SHALL: be guilty of objectionable demonstrations of dissent at official's decision.
4. NO PLAYER SHALL: discuss with an official, in any manner, the decision reached by such official except the manager or captain.
5. NO PLAYER SHALL: be guilty of using unnecessarily rough tactics in the lay of the game against the body or person of an opposing player. Officials are required to immediately suspend the player from further play and report such player to the Recreation Supervisor.
6. NO PLAYER SHALL: be guilty of physical attack as an aggressor upon any player, official or spectator. Officials are required to immediately suspend the player from further play and report such player to the Recreation Supervisor. Such player shall remain suspended until the case has been considered by the Recreation Supervisor.
7. NO PLAYER SHALL: be guilty of an abusive verbal attack upon any player, official or spectator. Officials are required to immediately suspend the player from further play and report such player to the Recreation Supervisor. Such player shall remain suspended until the case has been considered by the Recreation Supervisor.
8. NO PLAYER SHALL: appear upon the field of play at any time in an intoxicated condition. Officials are required to immediately suspend the player from further play and report such player to the Recreation Supervisor. Such player shall remain suspended until the case has been considered by the Recreation Supervisor.

The MINIMUM penalty for infraction of any of the above rules shall be suspension from two League games.
 The MAXIMUM penalty for infraction will be removal from the Churchill Athletic Programs for life and/or assault charges filed.

Team Name: _____

Team Captain Name: _____ Phone _____

“ I have read and agree to abide by the above rules of conduct. ”

Player's Signatures:

- | | |
|----------|-----------|
| 1. _____ | 6. _____ |
| 2. _____ | 7. _____ |
| 3. _____ | 8. _____ |
| 4. _____ | 9. _____ |
| 5. _____ | 10. _____ |