

I would like to register a team to compete during the 2012 session(s). If this registration is accepted, I will be responsible for my team's fulfillment of all rules and regulations established for the operation of the league by Hopkins-Minnetonka Recreation Services.

Session	Fee
<input type="checkbox"/> Spring Session (Dates: Begins the week of March 26, 2012)	\$120/team

League (check one)	League Play Classification					
<input type="checkbox"/> Women's League (Monday) Course #22958	<input type="checkbox"/> Advanced	<input type="checkbox"/> Gold	OR	<input type="checkbox"/> Silver		
	<input type="checkbox"/> Intermediate	<input type="checkbox"/> A	<input type="checkbox"/> Gold	OR	<input type="checkbox"/> Silver	
		<input type="checkbox"/> B	<input type="checkbox"/> Gold	OR	<input type="checkbox"/> Silver	
<input type="checkbox"/> Co-Rec League (Thursday) Course #22959	<input type="checkbox"/> Intermediate	<input type="checkbox"/> A	<input type="checkbox"/> Gold	OR	<input type="checkbox"/> Silver	
		<input type="checkbox"/> B	<input type="checkbox"/> Gold	OR	<input type="checkbox"/> Silver	

Team Contact Information					
Team Name:		H Phone:			
Manager:		W Phone:			
Address:		City:		Zip:	
Email:					

Payment Information			
<input type="checkbox"/>	VISA	Credit Card #:	
<input type="checkbox"/>	MasterCard	Exp. Date:	
<input type="checkbox"/>	Discover		
Amount to be charged: \$		Signature:	

Data Privacy Act		
The Minnesota Data Privacy Act requires that the registration information you provide on this form remain as private data. Private data is available to you but not the public. While you may choose to withhold this private data, there may be consequences that could limit the distribution of information to the participant (i.e., no managers list). By signing below, you are consenting to allow registration information to be shared with the coach, supervisor, or instructor and other registered program participants for purpose of administering the activity. This consent will expire upon completion of this activity.		
Release of Liability		
By signing this application form, I am acknowledging on behalf of myself and my organization or group ("the participants") that use of the Hopkins-Minnetonka Recreation facilities carries a risk of personal injury. The participants RELEASE and DISCHARGE Hopkins-Minnetonka Recreation Services, the Cities of Hopkins and Minnetonka, and their agents and employees, from liability for injuries or damage, including any losses CAUSED BY THE NEGLIGENCE OR STRICT LIABILITY of the released parties. The participants agree not to sue or make a claim against those agencies and agree to hold them harmless and indemnify them from all claims and suits that may be brought as a result of use of these facilities.		
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; border-bottom: 1px solid black;">Signature:</td> <td style="width: 40%; border-bottom: 1px solid black;">Date:</td> </tr> </table>	Signature:	Date:
Signature:	Date:	

Enclosed is the registration information for the Hopkins-Minnetonka Recreation Services Adult Volleyball program. After reviewing this information, you may register your team by:

1. Phone: 952-939-8203
2. Email: send registration form to recservices@eminnetonka.com
3. Fax: 952-939-8311
4. Mail or in-person: 14600 Minnetonka Blvd, Mtna, MN 55345

LEAGUE STRUCTURE: The spring volleyball season is six weeks long. A women's league is offered on Monday evenings for advanced and intermediate level teams. A co-rec league is offered on Thursday evenings for intermediate level teams. Leagues begin the week of March 26, 2012. Games will be held at the Lindbergh Center and the West Jr. High Activity Structure.

LEAGUE FEE: \$120 per team due at the time of registration

REGISTRATION DATES:

1. May register beginning February 1 – Returning teams from the previous season
2. May register beginning February 8 – Open Registration to all teams

The registration deadline is March 9 or until the league fills.

REQUIRED FORMS:

1. Registration Form – Not required for phone or online registration
2. Team Roster

ROSTERS: The team manager *must, using the official roster form*, list the name, full address, and phone number(s) for each player, then sign and submit it to the Recreation Services office. Rosters must be submitted before your second league game. Failure to submit an official and legible roster before your second league game will make your team ineligible and will cause you to forfeit the game.

CONDUCT VIOLATION POLICY: The following incidents will be assessed a \$20 per violation fee:

1. Unannounced Forfeit – forfeit must be reported to the league manager by 3pm the day of game.
2. Player Ejection
3. Unrostered Player



NOTE: If you'd prefer to complete an electronic version of this roster, please call 952-939-8203 to have one emailed to you.

Team Roster

Sport (select one)		
<input type="checkbox"/> Basketball	<input type="checkbox"/> Broomball	<input type="checkbox"/> Football
<input type="checkbox"/> Volleyball	<input type="checkbox"/> Kickball	<input type="checkbox"/> Softball
League (select one)		
<input type="checkbox"/> Men	<input type="checkbox"/> Women	<input type="checkbox"/> Co-Rec

Team Contact Information				
Team Name:		Sponsor:		
Manager:		H Phone:	W Phone:	
Address:		City:	Zip:	
Email:				
Asst. Manager:		H Phone:	W Phone:	
Address:		City:	Zip:	
Email:				

Manager's Affirmation: As the manager of this team, I understand that it is my responsibility to inform the team members of the rules and regulations that govern this activity and any consequences that may result if these guidelines are not followed. I obtained the following addresses and phone numbers and know that they are authentic. I certify that all listed players are fully aware of all rules and regulations and the penalties for any violations.

I have read the above guidelines and agree to abide by them: Date: _____

Minnesota Tort Claims Act
 Under Minnesota law, the cities of Hopkins and Minnetonka are not liable for injuries related to the operations and maintenance of facilities used for the provision of recreation programs.



NOTE: If you'd prefer to complete an electronic version of this roster, please call 952-939-8203 to have one emailed to you.

Team Roster

Team Name:		Sport:	
Manager's Name:			

1.	Name:		
	Address:	H Phone:	
	City & Zip Code:	W Phone:	

2.	Name:		
	Home Address:	H Phone:	
	City & Zip Code:	W Phone:	

3.	Name:		
	Home Address:	H Phone:	
	City & Zip Code:	W Phone:	

4.	Name:		
	Home Address:	H Phone:	
	City & Zip Code:	W Phone:	

5.	Name:		
	Home Address:	H Phone:	
	City & Zip Code:	W Phone:	

6.	Name:		
	Home Address:	H Phone:	
	City & Zip Code:	W Phone:	

7.	Name:		
	Home Address:	H Phone:	
	City & Zip Code:	W Phone:	

8.	Name:		
	Home Address:	H Phone:	
	City & Zip Code:	W Phone:	

9.	Name:		
	Home Address:	H Phone:	
	City & Zip Code:	W Phone:	

10.	Name:		
	Home Address:	H Phone:	
	City & Zip Code:	W Phone:	



NOTE: If you'd prefer to complete an electronic version of this roster, please call 952-939-8203 to have one emailed to you.

Team Roster

11.	Name:			
	Home Address:		H Phone:	
	City & Zip Code:		W Phone:	

12.	Name:			
	Home Address:		H Phone:	
	City & Zip Code:		W Phone:	

13.	Name:			
	Home Address:		H Phone:	
	City & Zip Code:		W Phone:	

14.	Name:			
	Home Address:		H Phone:	
	City & Zip Code:		W Phone:	

15.	Name:			
	Home Address:		H Phone:	
	City & Zip Code:		W Phone:	

16.	Name:			
	Home Address:		H Phone:	
	City & Zip Code:		W Phone:	

17.	Name:			
	Home Address:		H Phone:	
	City & Zip Code:		W Phone:	

18.	Name:			
	Home Address:		H Phone:	
	City & Zip Code:		W Phone:	

19.	Name:			
	Home Address:		H Phone:	
	City & Zip Code:		W Phone:	

20.	Name:			
	Home Address:		H Phone:	
	City & Zip Code:		W Phone:	



NOTE: If you'd prefer to complete an electronic version of this roster, please call 952-939-8203 to have one emailed to you.

Team Roster

21.	Name:			
	Home Address:		H Phone:	
	City & Zip Code:		W Phone:	

22.	Name:			
	Home Address:		H Phone:	
	City & Zip Code:		W Phone:	

23.	Name:			
	Home Address:		H Phone:	
	City & Zip Code:		W Phone:	

24.	Name:			
	Home Address:		H Phone:	
	City & Zip Code:		W Phone:	

25.	Name:			
	Home Address:		H Phone:	
	City & Zip Code:		W Phone:	

26.	Name:			
	Home Address:		H Phone:	
	City & Zip Code:		W Phone:	

27.	Name:			
	Home Address:		H Phone:	
	City & Zip Code:		W Phone:	

28.	Name:			
	Home Address:		H Phone:	
	City & Zip Code:		W Phone:	

29.	Name:			
	Home Address:		H Phone:	
	City & Zip Code:		W Phone:	

30.	Name:			
	Home Address:		H Phone:	
	City & Zip Code:		W Phone:	