



Fall 2019 Women's Volleyball League

LEAGUES OFFERED:

- **UPPER** **League Code#** [1903589](#)
Skilled players/teams with competitive experience.
- **LOWER** **League Code#** [1903588](#)
Skilled players/teams with full knowledge of the game.

IMPORTANT DATES:

- Monday July 22, 2019 - Registration opens for Bellevue residents & returning teams
- Monday July 29, 2019 - Registration opens for everyone.
- Friday August 16, 2019 4:30 pm - Registration & Payment Deadline
- September 15 – December 19, 2019 - League Play

COSTS:

- League Fee: **\$300** per team
Nonrefundable if requested less than 3 weeks prior to start of league play or schedules have been set.
\$35 administrative fee if refund/change request granted.
- Cash, Checks, Visa, and MasterCard accepted.

LEAGUE INFORMATION:

- **10** matches guaranteed, one match per week. Playoffs optional.
- Game night: Wednesday
- Holidays observed: Presidents Day, Easter, Memorial Day, 4th July, Thanksgiving, Christmas, New Year. If scheduling allows, others might be accommodated if requested with registration.
- Gyms: South Bellevue Community Center, Tye Community Gym, and Hidden Valley Sports Park.
- Format: 6-on-6, minimum 4 on the court at all times.
- Self-Officiated. **Required:** Teams to provide 2 players to officiate assigned matches.
- USAV rules with house modifications. See league rules: <https://parks.BellevueWA.gov/adult-leagues>
- Individuals can be placed on the Interested Players List. LEAGUES@BellevueWA.gov , (425)452-4479

REGISTRATION REQUIREMENTS:

- Registration Form/Info
- Team Roster and Liability Waiver **with residence addresses**
(**Online Registration:** Email to LEAGUES@BellevueWA.gov)
- Full League Fee
(**Company Sponsorship:** payment must be received by registration deadline. Contact Shirley)



REGISTRATION OPTIONS:

- Online Registration <https://register.BellevueWA.gov>
- Drop-Off Location: Bellevue City Hall
Service First Desk
450 110th Ave NE
Bellevue, WA 98004
- Mailing Address: Shirley Louie
Bellevue Parks & Community Services/Enterprise Division
PO Box 90012
Bellevue, WA 98009-9012
- E-mail Address: LEAGUES@BellevueWA.gov
- Fax: (425) 452-7221
Attn: Shirley Louie

FOR MORE INFORMATION:

- <https://parks.BellevueWA.gov/adult-leagues>
 - <https://register.BellevueWA.gov>
 - LEAGUES@BellevueWA.gov
 - League Coordinator: Shirley Louie
slouie@BellevueWA.gov
(425) 452-4479
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Fall 2019 Women's Volleyball League

Team Roster & Liability Waiver (rev 3/7/19)

WAIVER OF LIABILITY/RELEASE – PLEASE READ CAREFULLY

Team Name: _____

In consideration of myself and/or my child(ren) being allowed to use City of Bellevue Parks & Community Services facilities and/or participate in the City-sponsored activity(ies) identified herein, I **ASSUME ANY AND ALL RISKS, INCLUDING RISK OF INJURY OR DEATH**, associated with my or my child(ren)'s use of said facilities and/or participation in said activities. I further agree on behalf of myself, my heirs, executors, assigns, and personal representatives, to waive and **RELEASE** any and all rights and claims for damages, including attorney fees, I now, or may hereafter have, whether known or unknown, against the City of Bellevue and its officials, employees, and agents for any injuries suffered by me or my child(ren) in connection with the use of City facilities or participation in the City-sponsored activity(ies) identified herein. I acknowledge that I have carefully read this **WAIVER OF LIABILITY** and fully understand that I am waiving any right that I may have to bring a legal action or to assert a claim against the City of Bellevue in connection with the use of City facilities or participation in the City-sponsored activity stated below.

PHOTO/VIDEO RELEASE: I give my permission to have photos and/or video and audio recordings taken of me or my child(ren) during City of Bellevue activities and authorize the City of Bellevue to copyright, use, and publish the same. I understand I am waiving any right of privacy, compensation, copyright or other ownership right connected to the photo or recording. If you do not give permission to have photos and/or video and audio taken of you or your child(ren), please contact the main office at 425-452-4479 or Leagues@bellevuewa.gov.

I acknowledge that I have carefully read this **WAIVER OF LIABILITY / RELEASE** and fully understand that I am waiving any right that I may now or hereafter have to bring a legal action to assert any claim against the City of Bellevue in connection with my or my child(ren)'s participation in this activity.

I have voluntarily agreed to participate in Bellevue Parks and Community Services Adult Sports Leagues and I agree to adhere to League rules and regulations.

By signing the signature line below, I accept the conditions printed above.

Signature <i>(required before playing)</i>	Date	Printed Name	Phone(s)	Residence Address	City	Zip
1.						
2.						
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