

FALL EVALUATION CLINICS & CLUB TRYOUTS



Fall Evaluation Skills Clinics

9/20, 9/27 & 10/4

ANNY MORIN SPORTS COMPLEX
66 Clarksville Road, Folsom Ca

Sunday, September 20th

\$40.00

_____ **Session A:** 2pm – 4pm
13-12's yrs old and under (3rd - 5th grade welcome)

_____ **Session B:** 4pm – 6pm
14's yrs old 8th graders

Sunday, September 27th

\$40.00

_____ **Session C:** 2pm – 4pm
13-12's yrs old and under (3rd - 5th grade welcome)

_____ **Session D:** 4pm – 6pm
14's yrs old 8th graders

Sunday, October 4th

\$40.00

_____ **Session E:** 2pm – 4pm
13-12's yrs old and under (3rd - 5th grade welcome)

_____ **Session F:** 4pm – 6pm
14's yrs old 8th graders

Walk-ins welcome

Cash _____ Check _____ Venmo _____
Make all checks payable to "Gold Cal Jrs VBC"

Club Tryouts

October 11th

ANDY MORIN SPORTS COMPLEX
66 Clarksville Road
\$40.00

• Sunday, October 11th

2:00pm-3:30pm
13's-12's and under _____

4pm-5:30pm
14's and under _____

• Commitment Meeting...

Wednesday, October 14th

@ Andy Morin Sports Complex
66 Clarksville Road, Folsom

All required paperwork & registration instructions will be handed out at tryouts.

6pm (12's-13's)

6:40pm (14's)

Walk-ins welcome

Cash _____ Check _____ Venmo _____
Make all checks payable to "Gold Cal Jrs VBC"

PLAYER NAME:	AGE:	DOB:	HEIGHT:
ADDRESS:	CITY:	ZIP:	
HOME PHONE:	CELL PHONE:		
EMAIL:	POSITION 1:	POSITION 2:	
SCHOOL:	GRADE:	T-SHIRT SIZE:	
EMERGENCY CONTACT:	PHONE:		

RELEASE & INDEMNITY

In consideration for being permitted by Gold Cal Jrs Volleyball Club (GCJVBC), the City of Folsom (COF), the City of Rancho Cordova (CORC) in conjunction with Folsom Sports Complex (FSC) and All World Ball Academy to participate in the above activities. I hereby waive, release & discharge any & all claims for COVID, personal injury, death or property damage which I or my child (if participating) may have, of which hereafter accrue to me or my child, against GCJVBC as a result of my or my child's participation in the activities. This release is intended to discharge FSC, AWBA & GCJVBC, the COF & CORC, its officers, officials, employees & volunteers, & any other involved public agencies from & against any & all liability arising out of or connected in any way with my or my child's participation in the activity, even though that liability may arise out of the negligence or carelessness on the part of the person(s) or agency mentioned above. I further understand that accidents & injuries can arise out of the activities; including the risks of COVID 19 exposure, knowing the risks, nevertheless, I hereby agree to assume those risks & release & hold harmless all of the persons or agencies mentioned above whom throughout negligence or carelessness might otherwise be liable to me, or my child or immediate family for damages. It is further understood & agreed that this waiver, release & assumption of risk is to be binding of my & my child's immediate family. In addition, I agree to indemnify & hold harmless FSC, GCJVBC & COF, its, officers, employees & volunteers from & against all claims, damages, losses & expenses including attorney fees arising out of my or my child's participation in the activities described above, caused whole or in part by my child's negligent act, except where caused by the active negligence, sole negligence or willful misconduct of GCJVBC, the COF, the CORC, FSC & AWBA. I hereby irrevocably authorize Gold Cal Jrs Volleyball Club to edit, alter, copy, exhibit, publish or distribute photos & email address' taken for purposes of publicizing GCJVBC programs or for any other lawful purpose. I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. I waive any right to royalties or other compensation arising or related to the use of the photographs. I HAVE READ & UNDERSTAND THE ABOVE RELEASE & INDEMNITY AGREEMENT & FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY & AGREEMENT TO INDEMNIFY GOLD CAL JRS VOLLEYBALL CLUB, FOLSOM SPORTS COMPLEX & THE CITY OF FOLSOM & I SIGN IT OF MY OWN FREE WILL

Signature of Parent/Guardian

Date

Printed Name of Parent/Guardian

