



Adult Volleyball

Wednesdays

September 10 – November 12

8:15 PM – 10:15 PM

William Annin Middle School Gymnasium



Pick-up games of volleyball are organized for adults 18 years and older.

Up to four courts will be available for play. Get some exercise and enjoy the game!

\$25 per resident, \$40 per non-resident of Bernards Township for the session

Proof of residency required for resident rate

Refunds, less a \$10 administrative fee per registrant, will only be processed if requested before the programs start date (above). No refunds will be issued after the program starts.

You must be registered with the Recreation Department prior to attending an activity. If your household is new, inactive, or missing pertinent information you will need to complete a Household Information Form before registering for an activity.

Online Registration: Visit www.bernards.org. Call 908-204-3003 to request your User Name and Password. In-Person or Mail-In Registration: Complete the form below and return with check made payable to "Bernards Township" to Parks & Recreation, 1 Collyer Lane, Basking Ridge, NJ 07920.

Recreation program schedule subject to change due to scheduled school programs and inclement weather. Inclement weather cancellations will be sent via e-mail and posted to www.bernards.org.

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Bernards Township Department of Parks & Recreation

908-204-3003



www.bernards.org



Adult Volleyball Fall Session 2014

\$25 per resident, \$40 per non-resident

IMPORTANT!

In person and online registration for this program will begin **August 25th, at 8:30AM**. No registrations will be accepted before this date! Registrations dropped off before 8:30AM will be processed at the end of the day.

Name: _____ Home Phone #: (____) _____

Address: _____ Email: _____

Inclement weather cancellation notices will be sent by email!

As the participant in this program, I agree that this is a voluntary choice. I acknowledge that there are certain risks inherent in participation in this activity, and I agree to accept all of the consequences and assume the risks involved in participation. I give permission to the Township to provide emergency care as necessary for my well being until such time as a designated emergency contact may be reached. I understand and acknowledge that Bernards Township is not responsible for any loss, damages or injury to any person or property for any reason associated with my participation in this activity. In light of the above, I hereby agree to indemnify and hold harmless and release Bernards Township from any and all liability for any and all injuries I may sustain as a result of participation in this activity. This includes, but is not limited to, responsibility for the payment of any and all doctor, medical or hospital bills resulting from any and all injuries to me. I grant Bernards Township the right to use any and all photographs of myself participating in a Department sponsored activity for future media promotion. I confirm that I have read and understand the Recreation Department's registration policies and procedures.

For office use only: Cash _____ Ck. # _____ Received: _____