BUTTE-SILVER BOW PARKS AND RECREATION DEPARTMENT
1340 Harrison Ave
BUTTE, MT 59701
TELEPHONE: 406-497-6571
Recreation Activity/Release Form

Please check appropriate activity:

Women's Rec Volleyball_____($75/team) Fall Competitive Volleyball _____ ($75/team)
Co-Ed Rec Volleyball _____($75/team) Winter Competitive Volleyball _____ ($75/team)
Pickleball_____ ($50 Fall Session, $50 Winter Session)
Pickleball_____ ($25/For players who participated and played in the Fall session)

Team Name or Individual: _____ Date: _____
Team Manager: _____ Email: _____ Phone: _____
Someone who can be reached on Mondays (daytime phone): _____
Team Division: _____

Team rosters must be completed in each player's own handwriting and returned to the Parks and Recreation Department. All additions and releases must be cleared with the Parks and Recreation Director.

Anyone participating in a BSB Parks and Recreation Program must print and sign their name.

We, the undersign members, do hereby agree to accept complete responsibility in matter of any physical injury or loss that might result from participation in the games, practice, or travel to or from such activities. We further agree that in the event of such injury or loss that there shall be no liability on the part of Butte-Silver Bow, or any group associated in the sponsorship of the activity.

Player's Name **Player's Signature** **Email Address** **Phone Number**

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