

Dripping Springs ISD Community Services

DS Adult Spring (Ages 18+)



The Dripping Springs Adult Spring Volleyball League is a six-week program that will allow adults to form teams based on the following: Women's team / Men's team / Co-Ed team (consisting of at least 2 women). Players must register as a team and designate one person as team captain. Individual registrations will not be accepted. There is a maximum of 8 players per team. *Note: There must be at least 4 teams to run this league. If there are not enough teams in any one division, we will offer to combine divisions. All teams will be guaranteed 2 matches per night. On the final night, there will be a bracket to determine a league champion. League matches will consist of 2 sets to 25 with a /cap at 27. No third set will be played until bracket play on Apr 12. In order to ensure that all teams play 2 matches, there will be a time limit of 45 minutes per match.

When: Wed Mar 1 - Apr 12 (no volleyball Mar 15)

Time: 6:00 - 9:00 pm

Fee: \$600 per team (will include team t-shirts & officials)

Sessions: 6 classes

Location: DSMS Gym A/B

Organizer: Paige Frontera

SIGN UP TODAY!
Registration Deadline 2/17/17

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Register online at: <http://drippingspringsisd.revtrak.net>

DRIPPING SPRINGS ISD COMMUNITY SERVICES ENROLLMENT

MAIL OR DELIVER REGISTRATION FORM & PAYMENT TO:

Dripping Springs ISD Community Services
510 W. Mercer Street, P. O. Box 479
Dripping Springs, Texas 78620
Phone (512) 858-3021 Fax (512) 858-3099

Account Holder Information

Name _____ Phone Number _____

Address _____

Email _____

Head Coaches Name _____

Contact Number _____ Email _____

Team Name _____

T-shirts sizes for Team: AS____ AM____ AL____ AXL____ A2XL____

T-shirt Color - Please give 1st & 2nd choice of color. All team t-shirts will have a generic volleyball design, teams will be designated by color.

1st Choice - _____

2nd Choice - _____

REFUND POLICY: We will be happy to refund the full amount of tuition, less a \$10 processing fee, when you cancel prior to one week before the class begins. No refunds will be given after this time. Any changes to registrations prior to one week before class begins will result in a \$10 processing fee. No changes will be made after this time. Fees will not be prorated for late enrollment or missed classes. I have read and acknowledge the refund policy.

PICTURE/VIDEO RELEASE AGREEMENT: Student and Parent/Guardian release to DSISD the student's name, picture, art, written work, voice, verbal statements, portraits (video or still) and consent to their use by DSISD. DSISD and the agrees that the student's name, picture, art, written work, voice, verbal statements, portraits (video or still) shall only be used for honoring students, public relations, public information, school or district promotion, publicity and instruction. Student and Parent/Guardian understand and agree that: No monetary consideration shall be paid; Consent and release have been given without coercion or duress; This agreement is binding upon heirs and/or future legal representatives: The photo, video, student name, art work, written work, or students statements may be used in subsequent years.

WAIVER OF CLAIMS: I authorize the Dripping Springs ISD, its employees and agents to transport me or my child(ren) to the hospital, doctor, or dentist in the event of an injury or accident. I agree to assume all medical costs incurred. I further release Dripping Springs ISD, its employees and agents from all claims and responsibility for physical injury and property loss.

Signature _____ Date _____

Register Through Our Webstore!!
Online at: <http://drippingspringsisd.revtrak.net>