

Spring '12 Scalpball Volleyball Tournament

4 vs 4



The Spring Scalpball volleyball tournament is here. Depending on the teams entered there will be two divisions. One division is for teams ages 14-19. The second division is for teams with ANY player 20 and over. This will give everyone a great opportunity to play Volleyball at their level. Teams can be all female, all male, or they can be co-ed teams. The Tournament is a 4 vs 4 volleyball tournament. You can have up to 5 players on your team. Also, depending on the number of teams entered two different locations will be used. Teams will either play at Bratt First Baptist (half a mile up the road from Northview) or the Northview High School Gym. The finals will be played at Northview's Gym.

Date: May 19th

Time: 8:30 – until end of Finals

**Location: Northview High School Gym and
Bratt First Baptist Church's Gym**

**Team Fee: \$10 per player if paid by April 27th, \$12 per
player if paid by May 4th, \$14 per player if paid by May 11th,
and \$15 per player if paid by May 16th.**

****Registration Forms can be found at the attendance desk at Northview HS, at the Atmore YMCA, and Coach Heaton's Room. The registration forms can also be e-mailed to you, although you will have to return the signed form to the school or have it faxed.**

* All proceeds from the volleyball tournament will go to the Northview High School's Volleyball Team. Please remember this tournament is for fun and everyone should be respectful of each other. If you have any questions you can e-mail Coach Betty Heaton at bheaton@escambia.k12.fl.us or call the school at 850-327-6681. We look forward to seeing you there!!!



Spring '12 Scalpball Volleyball Tournament

Team Name _____

Captain Name _____ Bracket - Adult Teen

Phone Number _____ **Played Last Year? Y or N; Made it to Finals? Y or N**

Email _____

Age	Name (Please print clearly)	* Signature (Your signature below signifies that you have read and agree to the wavier below.) *Parent/Guardian must sign for participants under 18.	Payment *Check the box under the appropriate payment. Write number of players next to the box. *
			Paid by April 27th, \$10per player <input type="checkbox"/>
			Paid by May 4th, \$12 per player <input type="checkbox"/>
			Paid by May 11th, \$14 per player <input type="checkbox"/>
			Paid by May 16th, \$15 Per Player <input type="checkbox"/>

- Tournament is on May 19th.
- No more than 5 players on a team.
- Team fees are \$10 per player if paid by **April 27th**, \$12 per player if paid by **May 4th**, \$14 per player if paid by **May 11th**, and \$15 per player if paid by **May 16th**.
- Team fees can be paid by cash or check. All checks need to be made out to Northview Volleyball. Registration forms and entry fee will need to be turned into Coach Heaton or Mrs. Holland at Northview High School. Mrs. Holland can be found in the front office.
- Games will start at 8:30 a.m. All teams will need to be in attendance at 8:15 as brackets will not be posted until Saturday morning. The tournament will depend on the number of teams entered.
- No one under the age of 14 is permitted to participate.
- No profanity or alcoholic beverages.
- There will be refreshments and food at the concession stand for purchase.
- Please e-mail bheaton@escambia.k12.fl.us or call (850)327-6681 for additional information if needed.

***I know that playing in a volleyball tournament is a potentially hazardous activity that could cause injury or death. I should not play unless I am medically able and properly trained. By my signature above, I certify that I am medically able to perform in this event, am in good health, and am properly trained. I agree to abide by any decision made by the staff of this event relative to any aspect of my participation in this event, including the right to deny or suspend my participation for any reason whatsoever. I assume all risks associated with this event, including, but not limited to: falls, contact with other participants, the effect of competitive ball play, including high heat and/or humidity, the conditions of the gym, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release Northview High School, Bratt First Baptist, all staff, and successors from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver.**