

**MUD VOLLEYBALL TOURNAMENT TEAM REGISTRATION FORM**  
**SIGN US UP FOR SOME MUD SLINGING, GOOD CLEAN FUN!**

Fill out Registration Form completely & return with payment to:  
GSM Summer Festival, P.O. Box 260, Momence, IL 60954

Team Name: \_\_\_\_\_ Team Sponsor: Yes No If yes, who: \_\_\_\_\_

Alternate Team Name: \_\_\_\_\_ Category: Circle One: Ages 16 – 20    Ages 21 & Over

Team Captain: \_\_\_\_\_ Co-Captain: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_    City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Amount Enclosed: \_\_\_\_\_ \$200 per team before June 27; After June 27 - \$225 per team; Day of Event\*- \$250

\* No guarantee of space available

**Method of Payment**

Check or Charge Amount: \_\_\_\_\_

Please charge my \_\_\_\_\_ MC \_\_\_\_\_ VISA

Card Number: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**ACCIDENT WAIVER AND RELEASE OF LIABILITY**

This liability waiver must be signed by all Mud Volleyball Tournament participants. Any individual whose signature (or parent's signature) does not appear on this form will not be permitted to participate, and therefore, disqualifies the person from competition.

In consideration of my participation in the Mud Volleyball competition, the undersigned independently and collectively and on behalf of him/herself, heirs, legates, personal representatives and all those claiming by or through him/her consent to, and does hereby, discharge, release, and hold blameless in the Good Shepherd Manor and all sponsors and/or affiliates, employees, agents, assigns and successors from any and all claims, actions, losses, damages, or expenses for personal or bodily injury (including death), and property loss or damage incurred by him/her or arising out of or in connection with his/her participation in the aforementioned Mud Volleyball Tournament to be held at the Good Shepherd Manor Summer Festival, 4129 N. State Route 1 & 17, Momence, IL 60954.

I hereby grant Good Shepherd Manor and its legal representatives and assignees the irrevocable and unrestricted rights to publish photographs of me, or in which I may be included, for editorial, trade, advertising and any other purpose and in any other manner or medium. I hereby release Good Shepherd Manor and its legal representatives and assignees from all claims and liability relating to said photography.

I have read the foregoing and am of legal age to consent to this waiver. NOTE: If player is under the age of 18, a parent must sign.  
**FOR YOUR ENTRY TO BE ACCEPTED, YOU MUST HAVE ALL SIGNATURES: Print Name/Signature**

1. \_\_\_\_\_ 6. \_\_\_\_\_

2. \_\_\_\_\_ 7. \_\_\_\_\_

3. \_\_\_\_\_ 8. \_\_\_\_\_

4. \_\_\_\_\_ 9. \_\_\_\_\_

5. \_\_\_\_\_ 10. \_\_\_\_\_