



Team Registration Form

2025 Fall Volleyball

INSTRUCTIONS: All fields are required.

Return the filled-out registration form with your team fee, player fees, and a signed official roster to the Meridian Parks and Recreation Office by: **Wednesday, July 30th, by 5 p.m.**

Spots are on a first-come, first-serve basis and not guaranteed until payment is received in full. (If paying with two or more forms of payment types and/or multiple payees, please call beforehand for instructions as payment processes have changed.) Paperwork and payment must be received by the deadline and spots must still be open.

League Fees: (Includes 9 league games and End of Season Single Elimination Tournament, and USSSOA Registration.)

Player fees are non-transferable from player to player

Team Fees - \$315 per team

Meridian Resident Player Fee - \$10

Non-Resident Player Fee - \$20

Team Name: _____

Team Manager: _____ Phone: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Coed _____ Women's _____

Choose Your Preferred Division for This Season: **Please select only one division.** (Elite represents the highest level, while Social is the lowest.) Note that divisions may be combined.

Elite _____ Advanced Plus _____ Advanced _____ Intermediate Plus _____ Intermediate _____

Recreational Plus _____ Recreational _____ Social _____

**Scheduling Format: ** Generally, participation occurs once per week.

Coed teams will compete on Mondays, Wednesdays, and Fridays.

Women's teams will compete on Tuesdays, Thursdays, and Fridays.

Please provide your top two preferences: (Times are not guaranteed.)

6:00 p.m. _____ 7:00 p.m. _____ 8:00 p.m. _____ 9:00 p.m. _____

Spots are not guaranteed until payment is received in full. Paperwork and payment must be received by the deadline and still have available spots open.

Teams with Shared Players (please list team name and coach's name, if applicable): _____

Ways to Register: To secure your team's spot in the league, please complete the current registration form and roster form. After finalizing your paperwork, follow the steps below: *Ensure all payments are submitted by the deadline along with the completed registration form, current roster form, team fee, and player fees.*

Registration Options:

Phone-In: Call 208-888-3579 to make a payment over the phone using a credit card. Please email the completed registration and roster forms to recreation@meridiancity.org beforehand.

Walk-In: Visit our office at 33 E. Broadway Ave., Suite 206, with your completed registration and roster forms. You can pay in person using cash, check (made payable to the City of Meridian), or credit card.

Mail-In: Send your completed registration form and roster along with payment to 33 E. Broadway Ave., Suite 206, Meridian, ID 83642. *(Please note that your submission must be received by the deadline and there must be available spots.)*

Payment Method (Office Use Only)

Check #: _____ Cash: _____ Credit Card: _____ In Person or Online: _____

Date paid: _____ Amount Paid: _____ City Receipt Number: _____ Received By: _____

CITY OF MERIDIAN
 PARKS & RECREATION DEPARTMENT
 33 E. BROADWAY, MERIDIAN, ID 83642
 208-888-3579 FAX: 208-898-5501



Player fees are non-transferable from player to player.

SPORT: _____
 Coed _____ Men's _____ Women's _____
 YEAR: 2025-2026

TEAM NAME _____ COACH/MANAGER'S NAME _____
 HOME ADDRESS _____ CITY _____ STATE _____ ZIP _____
 PHONE (H) _____ (W) _____ E-MAIL ADDRESS _____

WAIVER AGREEMENT: I acknowledge that my participation in the above-written activity offered by the City of Meridian presents risks, some of which are unknown. I agree to assume all known and unknown risks associated with my participation. I hereby release and forever discharge the City, its agents and employees from all real or possible claims for damages or other harm to person or property not attributable to the tortious conduct of City's agents and employees, regardless of the manner by which such claim may be brought. I consent to and authorize first aid, emergency medical care, and/or hospitalization for treatment of injuries or illness that I sustain while or as a result of participating in this activity. I understand that I am solely responsible for any and all expenses that are incurred as a result of any injury or illness incurred while or as a result of participating in this activity. I acknowledge that the activity may be canceled with or without notice to me, due to unforeseen conditions beyond the control of the City. I consent to the publication and/or use of any photographs or recordings of me by the City for promotional purposes. I understand that my approval of this agreement means that I cannot later bring a claim against the City, its agents, and/or its employees. I have read, I understand, and I will comply with this agreement and all applicable rules, policies, and laws.

Your signature below indicates your approval of this agreement and your understanding that participation in this activity is subject to these conditions.

Player fees are non-transferable from player to player.

First place teams will receive individual awards. Awards are subject to change.

PLAYER NAME (Please Print)	PLAYER SIGNATURE	HOME ADDRESS/CITY	ZIP CODE	EMAIL	AGE	PHONE NUMBER	*SHIRT SIZE	MERIDIAN RESIDENT?
1.								Yes No
2.								Yes No
3.								Yes No
4.								Yes No
5.								Yes No
6.								Yes No
7.								Yes No
8.								Yes No
9.								Yes No
10.								Yes No
11.								Yes No
12.								Yes No

(PLEASE LIST ADDITIONAL PLAYERS ON SECOND ROSTER IF NECESSARY)

Coaches/Team Representative is responsible for turning in a completed Registration form, current season roster form, team fee, and player fees prior to the registration deadline. Spots are on a first-come, first-serve basis and not guaranteed until payment is received in full. Paperwork and payment must be received by the deadline and still have available sports open.

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13.								Yes No
14.								Yes No
15.								Yes No
16.								Yes No
17.								Yes No
18.								Yes No
19.								Yes No
20.								Yes No
21.								Yes No
22.								Yes No
23.								Yes No
24.								Yes No

(PLEASE LIST ADDITIONAL PLAYERS ON SECOND ROSTER IF NECESSARY) *First place teams will receive individual awards. Awards are subject to change.*

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