



# OFF *The* WALL SPORTS

1423 Chase Court Carmel, IN 46032 - (317) 580-5900 FAX: (317) 580-5905

[www.offthewallsports.net](http://www.offthewallsports.net)



## 10<sup>th</sup> Annual 3v3 New Year Kick-off

### REGISTRATION AND INFORMATION

- WHEN: Saturday, December 27<sup>th</sup> – Sunday, December 28<sup>th</sup> 2008
  - WHERE: Off the Wall Sports in Carmel, Indiana
  - 4 Games guaranteed with a maximum of 6 players per team
- 6 Souvenir T-shirts given to every team that can be worn as Game Jersey. Each team within a division will have a different color. Additional shirts\* available advance order only for \$10.

\*Shirts must be ordered by 12/16/08

### HOW TO REGISTER:

Call: 317-580-5900

Fax: 317-580-5905

E-mail: [manager@offthewallsports.net](mailto:manager@offthewallsports.net)

### REGISTRATION DEADLINE 12/16/08

(It is not necessary to have a final roster to register. First come first serve! We filled up many divisions last year so don't wait)

**COST: \$190 Per Team**

### REGISTER NOW! SPACE IS LIMITED!

#### TEAM AGE GROUP (Circle One)

Under 6 Under 8 Under 9 Under 10 Under 11 Under 12 Under 13 Under 14 Under 15  
Under 16 High School Adult Coed Women's Over 30 Men's Open Men's Over 30

LEVEL OF PLAY (A or B) \_\_\_\_\_

DIVISION (Male or Female) \_\_\_\_\_ Team Name \_\_\_\_\_

Club affiliation (used for game scheduling) \_\_\_\_\_

MANAGER'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP \_\_\_\_\_

HOME # \_\_\_\_\_ Work # \_\_\_\_\_

Other # \_\_\_\_\_ Fax # \_\_\_\_\_

EMAIL (Required) \_\_\_\_\_

CREDIT CARD (MC/VISA) \_\_\_\_\_ CARD NUMBER \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_

NAME AS IT APPEARS ON CARD \_\_\_\_\_

Unless another form of payment has been received, this credit card will automatically be charged. You must be paid in full to register.



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### 3v3 Team Roster 2008

**Team Age Group** \_\_\_\_\_ **Team Name** \_\_\_\_\_  
**Manager's Name** \_\_\_\_\_  
**Home #** \_\_\_\_\_ **Work #** \_\_\_\_\_  
**Other #** \_\_\_\_\_ **Fax #** \_\_\_\_\_  
**EMAIL (Required)** \_\_\_\_\_

**Waiver of Liability:** The signature below signifies acceptance of the following waiver of liability.

I acknowledge that Off The Wall Sports, LLC may compile address labels and lists and may utilize photographs of the named individual. I consent to these uses of my name, address and likeness and hereby waive all rights to compensation for their use in the promotion and/or operation of Off The Wall Sports, LLC.

To induce Off The Wall Sports, LLC to accept registration and permit participation in Off The Wall Sports, LLC sports programs, I hereby give my consent and agree to release, indemnify and hold harmless Off The Wall Sports, LLC, its officers, officials, coaches, employees and representatives from any claim arising out of injury to the named individual. I also hold harmless Off The Wall Sports, LLC, its officers, officials, coaches, employees and representatives from and against any claim arising out of injuries or conditions caused by or aggravated by my refusal to obtain available medical treatment based on religious or philosophical beliefs or otherwise.

I understand that as a participant in Off The Wall Sports, LLC sporting events that I must abide by all rules, regulations and philosophies of Off The Wall Sports, LLC.

**Player Information:**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Email \_\_\_\_\_  
 Signature \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
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