



CLUB REGISTRATION AND RELEASE FORM Team: _____

Club Activity: _____ Indian Hill Volleyball Club At Great Lakes Center (GLC) _____

Captain Name _____ Phone # _____

Email _____

In consideration of my being permitted to participate* in the above mentioned activity, I, for myself, my heirs, legal representatives, and assigns, do hereby release said activity, GLV Inc., Great Lakes Center and the Alcatel-Lucent Technologies, its employees and agents, from all suits, claims or demands of any kind, which may result from my death, injury, loss or damage of any kind, occasioned by my participation in said activity. This release in no way affects any rights I may have under any applicable Lucent Technologies Pension or Benefit Plan.

It is my further understanding that the arrangements for such activity are solely the undertaking of the participants and not Alcatel-Lucent Technologies Company.

I hereby warrant that I am of full age and free to give this release which I have read and understand.**

Signed:

Witnessed:

Date:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
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_____	_____	_____

* Refusal to sign this release disqualifies the applicant from authorized participation in the activity.

** If the above person is not 18 years of age or over, the person must have a parent's/guardian's approval to participate in said activity.

FORWARD THIS SIGNED AND COMPLETED FORM TO THE CLUB ACTIVITY CHAIRPERSON.