DODGEBALL TOURNAMENTS – (6 vs. 6)

Date: Sunday, March 1, 2015
Time: Noon
Where: Clive Elementary (1600 – 73rd St., Windsor Heights)
Division: Adult (Ages 16 and over)
Fee: $65 per team
Registration deadline: Monday, February 23, 2015

DIVISIONS ❑ **ADULT COED** ❑ **ADULT MENS**

Team name_____

Manager/Coach's name _____ E-mail _____

Address _____

City _____ State_____ Zip_____

Phone #s: Home_____ Work_____ Cell _____

PAYMENT INFORMATION

Cash amount_____ Check #_____ *(Please make check payable to City of Clive)*

*Credit card information: ❑ Discover ❑ MasterCard ❑ Visa

Credit card number_____ Credit card expiration date_____/_____

Signature_____

**If paying by credit card you may fax completed registration form with credit card number to (515) 457-3092.*

OFFICE USE ONLY: Date payment received_____ Received by_____ Amount paid_____

Clive PARKS & RECREATION

Send completed registration form and entry fee to:
Clive Parks & Recreation
Attn.: Doug Harris, 1900 N.W. 114th St., Clive, Iowa 50325
If you have any questions, contact Doug at (515) 223-5246.

Revised 9/3/14

PLAY

A. Six players playing per team. Up to ten players to a roster. Coed divisions consist of three female and three male.

B. The number of balls used – five standard (8.5") balls.

C. Players then take a position behind their end line. After a signal by the official, teams approach the centerlines to retrieve the balls. Boundaries for the court will be the basketball court.

D. Balls must be taken back across their attack line before they can be thrown at an opposing player. If the ball is not taken behind the attack line before it is thrown, the throw will not count.

E. If an opposing player is hit with any ball that has not yet touched the floor, wall or ceiling, that player is "out."

F. Play continues until one team is eliminated or the time limit (minutes) has expired.

G. The first team to win a majority of games wins the match.

RULES OF PLAY

A. Clothing is considered part of a player's body. Please try to avoid "head shots" but no penalty will occur. If a ball hits a person in the head or face, he is OUT!

B. Any ball that touches the floor, ceiling or wall is a dead ball.

C. If a defender catches a "live" thrown ball the thrower is out and one player then returns to the defender's side in order of first out, first in.

D. If a defender attempts to catch a live ball, but drops it, the defender is out.

E. The defender may block a live ball with another ball.

F. A blocked ball is "DEAD."

G. A deflected ball (off the body) caught by teammate results in the thrower is out but nobody returns.

H. If a blocking ball is dropped as a result of contact from a live ball, then the player who drops the ball is out.

I. A player may block a live ball, then throw the blocking ball down and catch a live ball.

J. A player shall not leave the playing field to avoid being hit or in an attempt to catch a ball.

K. Players who have been called out may retrieve stray balls for their teammates.

L. No Stalling — balls must be thrown (20 seconds).

M. Any team intentionally delaying the game is subject to a penalty.

N. All games will have a time limit. If games run quickly — games will be moved up.

TOURNAMENT WILL BE SET UP ACCORDING TO THE NUMBER OF TEAMS REGISTERED IN EACH DIVISION. TEAMS WILL BE NOTIFIED WHEN THEY PLAY BEFORE WEDNESDAY, FEBRUARY 25, 2015.

Clive Parks and Recreation – 2015 Dodgeball Tournament

Team Name _____

I the undersigned participant or parent/guardian, if participant is a minor child, certify that I have read and am familiar with the rules of the league and agree to abide the rules as listed and by any changes to rules as set forth by the Department. I understand that there are inherent risks in participating in this activity. Further, I hereby agree to indemnify and hold harmless the Clive Parks and Recreation Department and City of Clive, its agents, commissioners, officers, volunteers, officials and employees ("Released Parties") from any and all liability for personal injuries or damages I may hereafter sustain while participating in, traveling to or from, or observing of the Department sponsored activities/leagues whether such personal injuries or damages are caused by the negligence of the Released Parties or otherwise, to the full extent permitted by law. I also give permission for any photos/videos of these participants taken during the program to be used for future departmental promotional materials.

ALL INFORMATION MUST BE PROVIDED TO PARTICIPATE IN THE TOURNAMENT.

ALL FEES AND ROSTER (COMPLETE WITH SIGNATURES) MUST BE TURNED IN BY THE DEADLINE.

1. Date: _____/_____/_____ Name: _____

Address: _____ City: _____ Zip:_____

Phone: (H) _____ (O)_____ (C) _____

Signed: _____ Resident: ❑ Yes ❑ No

2. Date: _____/_____/_____ Name: _____

Address: _____ City: _____ Zip:_____

Phone: (H) _____ (O)_____ (C) _____

Signed: _____ Resident: ❑ Yes ❑ No

3. Date: _____/_____/_____ Name: _____

Address: _____ City: _____ Zip:_____

Phone: (H) _____ (O)_____ (C) _____

Signed: _____ Resident: ❑ Yes ❑ No

4. Date: _____/_____/_____ Name: _____

Address: _____ City: _____ Zip:_____

Phone: (H) _____ (O)_____ (C) _____

Signed: _____ Resident: ❑ Yes ❑ No

5. Date: _____/_____/_____ Name: _____

Address: _____ City: _____ Zip:_____

Phone: (H) _____ (O)_____ (C) _____

Signed: _____ Resident: ❑ Yes ❑ No

Clive Parks and Recreation – 2015 Dodgeball Tournament

Team Name _____

I the undersigned participant or parent/guardian, if participant is a minor child, certify that I have read and am familiar with the rules of the league and agree to abide the rules as listed and by any changes to rules as set forth by the Department. I understand that there are inherent risks in participating in this activity. Further, I hereby agree to indemnify and hold harmless the Clive Parks and Recreation Department and City of Clive, its agents, commissioners, officers, volunteers, officials and employees ("Released Parties") from any and all liability for personal injuries or damages I may hereafter sustain while participating in, traveling to or from, or observing of the Department sponsored activities/leagues whether such personal injuries or damages are caused by the negligence of the Released Parties or otherwise, to the full extent permitted by law. I also give permission for any photos/videos of these participants taken during the program to be used for future departmental promotional materials.

ALL INFORMATION MUST BE PROVIDED TO PARTICIPATE IN THE TOURNAMENT.

ALL FEES AND ROSTER (COMPLETE WITH SIGNATURES) MUST BE TURNED IN BY THE DEADLINE.

6. Date: _____/_____/_____ Name: _____

Address: _____ City: _____ Zip:_____

Phone: (H) _____ (O)_____ (C) _____

Signed: _____ Resident: ❑ Yes ❑ No

7. Date: _____/_____/_____ Name: _____

Address: _____ City: _____ Zip:_____

Phone: (H) _____ (O)_____ (C) _____

Signed: _____ Resident: ❑ Yes ❑ No

8. Date: _____/_____/_____ Name: _____

Address: _____ City: _____ Zip:_____

Phone: (H) _____ (O)_____ (C) _____

Signed: _____ Resident: ❑ Yes ❑ No

9. Date: _____/_____/_____ Name: _____

Address: _____ City: _____ Zip:_____

Phone: (H) _____ (O)_____ (C) _____

Signed: _____ Resident: ❑ Yes ❑ No

10. Date: _____/_____/_____ Name: _____

Address: _____ City: _____ Zip:_____

Phone: (H) _____ (O)_____ (C) _____

Signed: _____ Resident: ❑ Yes ❑ No