

BIG PINK VOLLEYBALL



TOURNAMENT INFORMATION & RULES

Big Pink Volleyball is a nation-wide volleyball tournament. Here at UW Tacoma, the event is organized by the Center for Student Involvement. Teams of up to ten play with a four-foot wide, hot pink volleyball. Registration is open to UW Tacoma students, faculty and staff members, as well as members of the YMCA with an active membership.

To learn more about Big Pink, visit our website at tacoma.uw.edu/bigpink.

DATES & DEADLINES

REGISTRATION	Registration and fees are due by 5:00pm on Monday, February 11, 2019. Register your team online at www.UWTickets.com
REGISTRATION FEE	UW Tacoma students play for free! Faculty/staff and non-student YMCA members have a registration fee of \$5 per person.
PLAY!	Tournament dates are February 20 and 21 in the late afternoon and evening. All games will be held on the court in the University Y Student Center. Games will be split between both dates, so please be sure that your team is available during both days - the whole duration of the tournament.

IMPORTANT GUIDELINES

1. **Please be 15-20 minutes early to your games.** Late arrivals will forfeit their games.
2. To access the University Y Student Center, players must have a YMCA membership or complete a Guest Pass waiver (located at the end of this packet). In addition to the Guest Pass, a valid driver's license/state ID is required for entry. Please print and bring this waiver with you to your game time.
3. All players must complete a tournament waiver for UW Tacoma, which is located in this packet. Please print and bring this with you to your game time.
4. Please check-in at the registration table before each game.
5. Scores will be reported to the registration table after each game by a referee. This is when a winning team will be notified of their next game time.
6. The tournament is single elimination.
7. Team pictures will be taken on the first night of play and posted on our [Facebook event page](#).

BIG PINK VOLLEYBALL RULES

TEAMS

1. Teams must have at least four (4) people and the maximum team size is ten (10) players.
2. A maximum of six people can be on the court from one team at a time.
 - a. If there are more than six members to a team, you may sub in and out at any dead ball time.
3. Players can play on multiple teams; however, players must choose one team to play on in the event two of their teams play each other. If a non-student, player must pay \$5.00 registration PER TEAM they play on.

SCORING

1. Rally scoring: A point is scored on every serve regardless of the team that serves.

PLAYING

1. A ball cannot be played off the wall or divider curtain.
 - a. Trapping the ball in the net is not allowed.
2. A maximum of three (3) hits per side is allowed.
3. The same person may not hit the ball twice in a row.
4. The ball cannot be kicked or headed at any time.
5. No leaning or sitting on the ball.
6. A player cannot hit the net while making a play.
7. Games last for 15 or 20 minutes (pending number of registered teams). The team with the most points at the end of the time wins. In the case of a tie, play will continue until the next point is scored.

SERVING

1. Players must rotate at the beginning of every server exchange on the respective team. Rotation is clockwise.
2. Server must serve from behind the serve line (the 10-foot line).
3. Two members of the team may hold the ball up, with each person having one foot on each side of the server line. The server may hit the ball out of their hands.
4. The receiving team may not attempt to block/spike another team's service.

ATTIRE

1. No jewelry (including rings, ear and facial piercings and necklaces), or watches are allowed during play.
 - a. Jewelry that cannot be removed must be covered with a Band-Aid.
2. Athletic shoes are required (i.e. no flip-flops, dress shoes, or barefoot).

ATTITUDE

1. Have fun!
2. All players must maintain respectful of opponents, officials, and people operating the tournament.

TO BE COMPLETED BY ALL PARTICIPANTS INDIVIDUALLY:

**UW Tacoma Student Engagement
Big Pink Volleyball 2019 Tournament
Participant Agreement and Waiver**

_____ (Participant) has registered to participate in the Big Pink Volleyball 2019 Tournament sponsored by the University of Washington Department of Student Engagement, on February 20 and 21, 2019.

Participant acknowledges that physical injury and death are risks inherent in this event, and that s/he assumes such risks. Participant represents that s/he is capable, with or without reasonable accommodation, of undertaking this event.

Participant agrees not to claim against the University of Washington for injury, damages, or losses other than those arising from the negligent acts or omissions of the University of Washington, its employees, students and agents acting in the course and scope of the University-imposed duties. If Participant is injured, s/he consents to emergency medical treatment at his/her expense.

Participant's Signature
(Or Guardian's, If Under 18)

Date

Emergency Contact (optional)

Contact's Phone Number



**Guest Pass Application
YMCA OF PIERCE AND KITSAP COUNTIES**

***COMPLETE HIGHLIGHT SECTIONS**

PLEASE COMPLETE ALL NON-SHADED AREAS OF THIS FORM

* TODAY'S DATE (MM/DD/YYYY)		* IS THIS YOUR FIRST VISIT TO THIS Y? <input type="checkbox"/> Yes <input type="checkbox"/> No		GUEST UNIT NO.	
* ADULT GUEST PARENT/GUARDIAN INFORMATION (IF GUEST UNDER 18)					
FULL NAME (FIRST M.I. LAST)			AGE		DATE OF BIRTH (MM/DD/YYYY)
EMAIL			GENDER <input type="checkbox"/> M <input type="checkbox"/> F		PRIMARY PHONE
STREET ADDRESS			CITY		STATE ZIP
EMERGENCY CONTACT NAME			RELATION TO GUEST		EMERGENCY CONTACT PHONE
GUEST OF (PLEASE PRINT MEMBER'S NAME)			MEMBER UNIT NO.		
ADDITIONAL GUESTS FROM SAME HOUSEHOLD YOUTH INFORMATION					
NAME (GUEST 1)			RELATION TO PRIMARY		DATE OF BIRTH (MM/DD/YYYY)
NAME (GUEST 2)			RELATION TO PRIMARY		DATE OF BIRTH (MM/DD/YYYY)
NAME (GUEST 3)			RELATION TO PRIMARY		DATE OF BIRTH (MM/DD/YYYY)
NAME (GUEST 4)			RELATION TO PRIMARY		DATE OF BIRTH (MM/DD/YYYY)
NAME (GUEST 5)			RELATION TO PRIMARY		DATE OF BIRTH (MM/DD/YYYY)
* CONDITIONS OF GUEST USE AT THE YMCA OF PIERCE AND KITSAP COUNTIES ("THE Y")					
<p>Cell Phone/Videotaping: Due to the advances in video equipment and telephone video technology, and for the safety of our members and guests, any and all video- and picture-capable equipment and devices may not be used in locker rooms, dressing areas, shower areas, restrooms, or other areas deemed to be "private" within the Y's facilities. The Y requests cell phone usage be reserved for the lobby or designated cell phone areas only, without exception. Text messaging and personal audio listening devices (earbuds or headphones) are permitted in exercise areas if such use does not impact personal safety or the safety of others.</p> <p>Criminal History: The Y conducts regular sex offender screenings on all members, participants, and guests. If a sex offender match occurs, the Y reserves the right to cancel membership, end program participation, and remove visitation access. Applicant acknowledges it is the policy of the Y to deny membership to any individual registered as a sex offender regardless of offender level or time of conviction.</p> <p>Insurance: Applicant understands the Y does not provide any accident or health insurance for its members or participants, and further understands it is the applicant's responsibility to provide such coverage.</p> <p>Member Conduct and Right to Use the Facility: Applicant agrees to abide by all policies and procedures of the Y and its branches, including the member code of conduct, and understands failure to act in accordance with these rules may result in expulsion from the Y and revocation of the membership.</p> <p>Member Health: Applicant represents that he/she is in physically sound condition and understands participation in fitness classes and other exercise, weight training, recreational sports, and use of pools, spas, saunas, steam rooms, and fitness equipment carry a potential risk of injuries or illness. Applicant understands the Y assumes no responsibility for any such injury, illness, or death. I also hereby acknowledge my responsibility in and commit to communicating any physical and/or psychological concerns that might conflict with my participation in any activity before engaging in such activities and, if the same arise during any activity, then promptly upon experiencing such concerns.</p> <p>Membership Billing: Any discrepancies to membership billing must be brought to the Y's attention within 90 days. The Y is not liable for any discrepancies to membership billing issues past 90 days.</p> <p>Photograph Permission: Applicant hereby grants permission for the Y to use, without limitation or obligation, photographs or other media that may include the member's image or voice to promote or interpret the Y's programs.</p> <p>Privacy Policy: The Y holds the privacy of its members and employees as a high priority to maintain their personal information in confidence. As an expression of the Y's commitment to protect the personal information of its members and employees, a privacy statement has been adopted.</p> <p>Property Loss: Applicant understands the Y is not responsible for personal property lost, damaged, or stolen while using the Y's facilities, including parking lots and off-site locations, or participating in the Y's programs.</p> <p>Third-Party Vendors: Limited member information may be shared with third-party vendors who have contracted with the YMCA to provide services for the YMCA's members/participants enrolled in certain programs or activities at the YMCA. Please contact your local YMCA membership director if you wish to opt out.</p> <p>Our full privacy statement can be found at https://www.ymapkc.org/privacy</p>					

PLEASE SIGN BACK SIDE OF THIS FORM TO COMPLETE THE APPLICATION

*** WAIVER AND RELEASE OF LIABILITY**

I am aware that participation in YMCA programs and use of YMCA facilities may involve certain hazards associated with equipment, physical exertion, games, sports, and other programs/activities offered by the YMCA. In consideration of, and as part payment for, the right to use YMCA facilities and participate in YMCA programs, I hold harmless, waive, and release the YMCA ("YMCA" includes its employees, volunteers, directors, officers, and agents) for damages of any type, including permanent physical injuries or death, arising out of the ordinary negligence of the YMCA and also for damages of any type arising out of my own negligence, in whole or in part. By participating in the YMCA Nationwide Membership program, I agree to release the National Council of Young Men's Christian Associations of the United States of America, and its independent and autonomous member associations in the United States and Puerto Rico, from claims of negligence for bodily injury or death in connection with the use of YMCA facilities, and from any liability for other claims, including loss of property, to the fullest extent of the law.

I assume all risk of injuries and damages associated with my participation in YMCA programs and the use of YMCA facilities including, but not limited to, falls, slips (whether occurring while in the building, offsite as a part of a program, or anywhere else on the YMCA facilities or property, including adjacent sidewalks, access, and parking areas), contact with other participants, sudden and unforeseen malfunctioning of any equipment, instruction, training, supervision, massage, therapy, classes, or dietary recommendations, the effects of the weather and/or temperature indoor or outdoor, and all other such risks being known and appreciated by me.

This release includes foregoing any claim I may have for ordinary negligence arising out of my children's use of YMCA facilities or participation in YMCA programs. I understand that it is my responsibility to obtain a physician's release statement if my child has any physical or mental condition that may impair his or her ability to engage in any of the YMCA's programs or activities.

I fully understand and agree I am waiving all claims I may have against the YMCA arising out of the ordinary negligent acts by the YMCA, and I agree I will not bring a lawsuit against the YMCA arising out of its ordinary negligence. If any portion of this Release is held invalid, I agree the remainder shall continue to be enforceable.

* GUEST SIGNATURE	DATE (MM/DD/YYYY)
ADDITIONAL GUEST SIGNATURE	DATE (MM/DD/YYYY)
PARENT/GUARDIAN SIGNATURE (IF GUEST UNDER AGE 18)	DATE (MM/DD/YYYY)

FOR OFFICE USE ONLY

NATIONWIDE MEMBERSHIP: YMCA BRANCH

VERIFIED BY	DATE
-------------	------

ACTIONS	ID SCANNED/SCREENED	PHOTO TAKEN	ALERT
Guest 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Guest 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Guest 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Guest 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Guest 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

APPLICATION EXPIRATION DATE
INITIAL AND DATE