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2019

**TOURNAMENT INFORMATION**

*The Big Pink Volleyball tournament is a philanthropic event sponsored by Trinity Foundation to raise funds for Breast Cancer charities. Teams play volleyball with a four-foot wide, hot pink volleyball. 2019 proceeds will be donated to Nanticoke Cancer Care Center in Seaford, DE. Participants may contribute by participating on a team, or by making a monetary or product donation through the Trinity Foundation.*

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| Registration | Entries and fees are due to secure a team on the tournament roster.Deadline February 15, 2019 |
| NOTE: | Liability waivers required for ALL players upon registration.All players will receive an event tshirt. Completed registration packets must be received by deadline to guarantee tshirt size. |
| Captains’ Communication | Final tournament information including first game start times will be communicated by email to the captains of each team by March 8, 2019 |
| Play! | Saturday, March 9, 2019 8:30 to 4:00pm.Delmarva Christian High School21777 Sussex Pines RoadGeorgetown, DE 19947 |
| Dress code | Sneakers are required for all players. NO earrings, necklaces, watches or bracelets permitted for any player. Creative uniforms encouraged as long as appropriate for a public, school setting. |
| NOTE: | There are a limited number of team spots available. 100% of team registration funds are due to secure your team spot. You will receive email confirmation that your team has secured a spot. |

Registration packets are available at Trinity Logistics, 50 Fallon Avenue, Seaford, DE and can be downloaded from www.trinityfoundation.com

**BIG PINK VOLLEYBALL RULES**

**Teams**

1. Teams are to consist of a maximum of eight players total per team
	1. A maximum of six players and a minimum of 4 players on the court at one time.
	2. Teams can be co-ed or single gender, but all teams play on a single tournament bracket.
2. You may substitute in and out at any dead ball time by notifying the referee of the substitution and waiting for the signal from the referee that it is clear to make the substitution.
3. Substitutions must be made to and from the same court position.

**Scoring**

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

**Play**

1. A ball cannot be played off the wall, poles or curtain.
	1. Trapping the ball in the net is not allowed.
2. Players must rotate after every server exchange. Rotation is clockwise.
3. Players in the back row may not jump in front of the 10-foot line to block or hit the ball.
	1. Players in the back row must stay in the back row.
4. Games last for 20 minutes. The team with the most points at the end of the 20 minutes wins.
	1. In the event of a tie, play until the next point is scored.

**Serving**

1. Server must serve behind the serve line (the 10-foot line).
	1. Two members of the team may hold the ball up and the server may hit it out of their hands, but they have to have one foot on each side of the server line.
	2. A receiving team may not attempt to block/spike another team's serve.
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 may not be kicked or headed at any time.
5. No leaning or sitting on the ball.
6. A player may not hit the net or step over the middle line while making a play.

**Attire**

1. No jewelry or watches are permitted during play.
2. Athletic shoes are required (i.e. no flip-flops, dress shoes, or barefoot).

**Attitude**

1. Have fun!!! And please be respectful of your opponents, officials, and people operating the tournament.

**Additional Notes**

1. Please arrive 15-20 minutes early to your games. Late arrivals will forfeit their games.
2. Check in with your team name to the referee before the start of each game.
3. Report the score of your game to the registration table. This is when you will find out when your next game is.
4. The tournament is a double elimination tournament.
5. Team pictures will be taken before the start of the first games.

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2019

**TEAM REGISTRATION**

\*REGISTRATION FORM AND TEAM CONTRIBUTIONS DUE TO SECURE TEAM ON TOURNAMENT ROSTER.

Team Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_ Captain's Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Captain's Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Captain's Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Affiliation/Organization (if any):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- |
| Player Name | Email | T-shirt size | Liability Waiver Included Trinity DCHS | Entry Fee  |
| 1. |  |  |  |  | $25.00 |
| 2. |  |  |  |  | $25.00 |
| 3. |  |  |  |  | $25.00 |
| 4. |  |  |  |  | $25.00 |
| 5. |  |  |  |  | $25.00 |
| 6. |  |  |  |  | $25.00 |
| 7. |  |  |  |  | $25.00 |
| 8. |  |  |  |  | $25.00 |
| **4-8 players - $200 per team** **8+ players - $25 per additional player**  | **Team Contributions** | **$200.00 (minimum)** |
| Additional Donations | $ |
| **Total Team Contributions** | **$** |

**MAKE CHECKS PAYABLE TO: Trinity Foundation**

**INDIVIDUAL REGISTRATION & LIABILITY WAIVER**

2019

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_M.I.:\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

RELEASE AND ACKNOWLEDGEMENT OF ASSUMPTION OF RISK

I, the undersigned, being over age 18 years, and desiring to participate, and/or being the parent or guardian of a minor child (“Child”) who would like to participate, in the above listed event (the “Event”) hosted by the Trinity Foundation and Trinity Logistics, Inc. (collectively, “Trinity”), hereby acknowledge, on my own behalf and on the behalf of my Child (if applicable), that participation in the Event requires certain physical and mental coordination skills and judgment and I hereby represent that those persons desiring to participate in the Event, namely me and my Child, if any, possess these skills and judgment and have no special needs for which Trinity would need to provide some type of accommodation.

I hereby agree, on my own behalf and on the behalf of my Child, if any:

(1) to assume the risk associated with my and my Child’s participation in the Event;

(2) to release Trinity and its trustees, shareholders, officers, contractors, employees, volunteers and agents (collectively, the “Indemnified Parties”), of and from any liability (including attorneys’ fees and costs) arising out of my and my Child’s participation in the event; and

(3) to indemnify, defend and hold harmless the Indemnified Parties, of and from any liability (including attorneys’ fees and costs) arising out of my and/or my Child’s participation in the Event, including without limitation any such liability arising out of the negligence of any of the Indemnified Parties.

In consideration of my participation in an activity on the campus of or within the facilities owned by Delmarva Christian School, Inc., I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Participant) hereby agree that Delmarva Christian Schools, including Delmarva Christian High School, and it’s personnel, shall not be held liable for any damages arising from personal injury or property damages sustained by me in, on, or about the premises or facilities resulting from or arising out of the use of intended use of the Schools facilities or equipment. I agree to assume full responsibility for any injuries which may occur to me in or about the School’s premises, or while intending to use the School’s equipment, including, but without limitation, any claim for personal injury or property damage resulting from or arising out of the negligence of the School, it’s agents or employees, or the negligence of any other persons present on the Schools premises.

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Participant Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

for himself/herself and for the following minor child for which the above is parent or guardian (print name of Child):

 \_\_\_\_\_\_\_\_\_\_\_\_

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