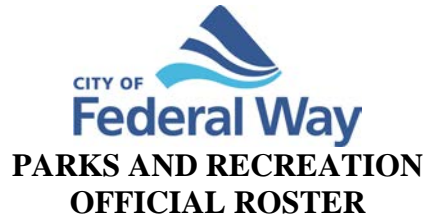


SPORT: \_\_\_\_\_  
 LEAGUE: \_\_\_\_\_  
 DIVISION: \_\_\_\_\_  
 TEAM NAME: \_\_\_\_\_



DUE: \_\_\_\_\_

	Name	Address	City	Zip	Phone	Email (Write Legibly)
<b>Manger:</b>					Home: Wk/Cell:	
<b>Alternate:</b>					Home: Wk/Cell:	

**\*\*PLAYERS' RELEASE AND LEGAL WAIVER – PLEASE READ BEFORE SIGNING ROSTER BELOW\*\***

Sports activities have a risk of injury, including exposure to the COVID-19 virus or similar pathogens. The undersigned players accept that participation in adult sports league activities on City premises is at their own risk and that they ASSUME ALL RISKS AND HAZARDS associated with such activities. In case of injury, they do hereby WAIVE ALL CLAIMS AND LEGAL ACTIONS, financial or otherwise, on their behalf, against the City of Federal Way, its employees, organizers, sponsors, supervisors, or any volunteer connected with the sports activity, including injury caused by the sole negligence of the City of Federal Way, but excluding gross negligence or intentional injury. The undersigned also agree that they understand and will comply with the established rules set forth by the City of Federal Way which govern play in the above-listed league.

	Player Name	Home Address	City	Zip	Phone	Birth Date	Age	Email (Write Legibly)	Signature
1.					Home: Wk/Cell:				
2.					Home: Wk/Cell:				
3.					Home: Wk/Cell:				
4.					Home: Wk/Cell:				
5.					Home: Wk/Cell:				
6.					Home: Wk/Cell:				
7.					Home: Wk/Cell:				
8.					Home: Wk/Cell:				
9.					Home: Wk/Cell:				

Player Name	Home Address	City	Zip	Phone	Birth Date	Age	Email (Write Legibly)	Signature
10.				Home: Wk/Cell:				
11.				Home: Wk/Cell:				
12.				Home: Wk/Cell:				
13.				Home: Wk/Cell:				
14.				Home: Wk/Cell:				
15.				Home: Wk/Cell:				
16.				Home: Wk/Cell:				
17.				Home: Wk/Cell:				
18.				Home: Wk/Cell:				
19.				Home: Wk/Cell:				
20.				Home: Wk/Cell:				
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27.				Home: Wk/Cell:				
28.				Home: Wk/Cell:				
29.				Home: Wk/Cell:				
30.				Home: Wk/Cell:				