Lee's Summit Parks & Recreation "ADULT BASKETBALL, Spring 2012" Official Team Roster & Waiver

TEAM NAME: _____ LEAGUE: _____ NIGHT: _____

MANAGER'S NAME: _____ DAY PHONE: _____ EMAIL: _____

This roster & waiver must be turned in before the start of the first game. Players may be added up until the start of the third game.
Players are only eligible to participate after they have completed this waiver in full. *(LSPR Fax: 816-969-1543 / Ph: 816-969-1542)*

PLAYER WAIVER, RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT
I, the undersigned player, agree that in consideration for the right to play as a member of the team designated below and in consideration for permission to play on the facility arranged for by the team or tournament: I voluntarily elect to accept and assume all risks and injury incurred or suffered by me (a) while practicing or playing as a member of the team so designated, (b) while serving in a non-playing capacity as a team member during practice or play by other teams or by other players on my team, and (c) while on or upon the premises of any and all of the facilities arranged for by my team or tournament for practice of play. I release, discharge and agree not to sue the team and tourney listed, facility owner, or their owners, officers, agents, servants, associations, employees, or any person or entity connected with the team, tournament, field or Lee's Summit Parks and Recreation Dept. for any claim, damages, costs or cause of action which I have sustained or incurred to me from whatever cause including but not limited to the negligence, breach of contract or wrongful conduct of the parties hereby released. I ACKNOWLEDGE THAT I HAVE READ AND THAT I UNDERSTAND EACH AND EVERY ONE OF THE PROVISIONS IN THIS WAIVER, RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT AND AGREE TO ABIDE BY THEM.

Name (Please Print)	**Address**	**City/State**	**Zip**	**Home Phone**	**Signature**	**Date**
1. Mgr.						
2.						
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