



SPRINGFIELD-GREENE COUNTY PARK BOARD YOUTH SPORTS ORIGINAL ROSTER

The parent or guardian that signs this form agrees that all their child's information is correct on this roster form. The undersigned, in consideration of participation in or as a spectator of this Springfield-Greene County Park Board activities, agrees to indemnify, hold harmless and release the City of Springfield, its agents, and employees from all liability for any injury which may be suffered by the below-named individual(s) registered in the activity arising out of or in any way connected with participation in this activity. Also, the undersigned and participant hereby grant permission to record and use the participant's likeness and/or voice for use by television, films, radio, printed media, social media, or other electronic format to further the aim of the Springfield-Greene County Park Board (Park Board) programs in related campaigns, magazines articles, booklets, posters, and other ways the Park Board sees fit. Also, the undersigned and participant hereby agree to follow all facility rules while spectating or participating in activities at the facility.

AGE _____ LEAGUE NIGHT _____ DIVISION _____

TEAM NAME _____ HEAD COACH _____

	NAME	ADDRESS	CITY & ZIP	PHONE #	BIRTHDATE	PARENT SIGNATURE
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APPROVED BY SPORTS OFFICE ON _____

INITIALS _____

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