$475/TEAM (+ $5 FOR 1ST NON-RESIDENT PLAYER ON TEAM - MAXIMUM $10 PER TEAM)

COMPLETED ROSTERS AND FEES ARE DUE BY THE ROSTER DEADLINE DATE. ANY ROSTER PLACED IN RECREATION DEPT. DROP BOX AFTER 5 P.M. ON DEADLINE DATE IS CONSIDERED LATE AND MUST **INCLUDE $30 LATE FEE. THE LATE FEE OF $30.00 WILL APPLY THE DAY AFTER THE DUE DATE**. ROSTERS WILL NOT BE ACCEPTED UNDER ANY CIRCUMSTANCES AFTER FRIDAY AT 5 P.M.

League *(Please Circle)* Men – Women - Coed

Division Desired _____ **(NOT GUARANTEED)**

Competitive / Intermediate / Recreation

Days of League Play:

Men's	Mon & Wed
Seniors & Women's	Tuesdays
Coed	Thurs & Fri

Yuba City Parks & Recreation Softball Team Roster

As manager of this team, I certify that all of the information here is true and correct and that each player has read and signed the AGREEMENT AND RELEASE OF LIABILITY. By my signature below, I further understand that any player listed below who has given incorrect information (age, legal address, etc.) shall be declared ineligible and shall cause my team to forfeit every game played.

Manager's Signature: _____

Team Name: _____

Fee Pd._____ Date _____ #_____

Manager _____

Address _____

City _____ Zip _____

Phone/Home_____ Office_____

Cell Phone _____ Fax _____

Email _____

I KNOW THE RISKS AND DANGERS INHERENT IN PARTICIPATING IN A SPORT OF THIS NATURE, AND REALIZE THAT UNANTICIPATED AND UNEXPECTED DANGERS MAY ARISE WHILE THE SPORT IS IN PROGRESS AND DURING OTHER ACTIVITIES ASSOCIATED WITH THIS SPORT. I VOLUNTARILY AGREE TO ACCEPT ANY AND ALL RISKS ON INJURY, DEATH, OR DAMAGES OF ANY NATURE RESULTING DIRECTLY OR INDIRECTLY FROM MY PARTICIPATION IN THIS SPORT. I FURTHER STATE THAT I AM PHYSICALLY FIT AND THAT I HAVE SUFFICIENTLY TRAINED FOR PARTICIPATION IN THIS EVENT OR ACTIVITY. I AGREE THAT THE CITY OF YUBA CITY, ITS EMPLOYEES, AND/OR AGENTS, AND OFFICERS, MAY ACT IN AN EMERGENCY AS BEST FITS THE SITUATION IF EFFORTS TO CONTACT ME, THE UNDERSIGNED OR OTHER EMERGENCY PERSONS FAIL.

In consideration of participating in this team sport, the Undersigned hereby voluntarily releases, discharges, waives and relinquishes any and all actions or causes of action for personal injury (including death) or property damage occurring to him/herself arising as a result of participating in or receiving instructions in said activity or any incidental activities. The Undersigned agrees that under no circumstance will he/she or his/her heirs, executors, administrators and assigns prosecute, present any claim for personal injury (including wrongful death) or property damage against CITY or any of its officers, agents, servants or employees for any of said or officers, agents, servants of employees for any said similar causes of action, including those which arise by the negligence of CITY or any of said persons. IT IS THE INTENTION OF THE UNDERSIGNED BY THIS INSTRUMENT, TO EXEMPT AND RELIEVE CITY FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE. The Undersigned further agrees to defend, indemnify and to hold harmless the CITY, its officers, employees, and agents from any loss liability, damage, cost or expense arising out of the participation in said activity.

I further grant full permission to any and all of the foregoing to use my name, photographs, videotapes or recordings of the sport for any purpose without obligation or liability to me. The Undersigned acknowledges that he/she, has been fully and completely advised of the potential dangers incidental to engaging in the activity, fully and voluntarily assumes the risks of engaging in the activity. The Undersigned has read this document and is fully aware of the legal consequences of signing it. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A LEGALLY BINDING CONTRACT BETWEEN THE CITY OF YUBA CITY AND ME, AND I SIGN IT OF MY OWN FREE WILL.

Yuba City Parks and Recreation Department reserves the right to photograph facilities, activities and program participants for potential future use. All photos obtain the property of Yuba City Parks & Recreation and may be used for publicity and promotional services.

PLAYERS NAME FIRST/LAST	COMPLETE ADDRESS	CITY ZIP CODE	PREVIOUS TEAM	AGE	HOME/CELL PHONE	WORK PHONE	SIGNATURE	DATE
1								
2								
3								
4								
5								

PLAYERS NAME FIRST/LAST	COMPLETE ADDRESS	CITY ZIP CODE	PREVIOUS TEAM	AGE	HOME/CELL PHONE	WORK PHONE	SIGNATURE	DATE
6								
7								
8								
9								
10								
11								
12								
13								
14 **MIN.**								
15								
16								
17								
18								
19								
20 **MAX**								

FOR DEPARTMENT USE ONLY:

PLAYERS NAME FIRST/LAST	STREET	CITY ZIP CODE	PREVIOUS TEAM	AGE	HOME PHONE	WORK PHONE	SIGNATURE	DATE