

## Cordova Recreation and Park District (916)362-1704

## **Adult Basketball League Roster Change Form**

Date:	Night of play:	Season:
Team Name:	Manager:_	_
NAME TO BE ADDED TO R	OSTER Each addition to roster will r	equire players signature please print:
Player Name:		Phone:
Address/City/Zip:		
	Agreement Waiver and Release of Liabilit	ty Athletic League
result of my participation in said activit any way with my participation in said a	y. This Association of America (its agents and Umpires),	property damage which I may have or which may hereafter accrue as , from and against any and all liability arising our of or connected in gence, breach of contract, or wrongful conduct on the part of said dis agents & Umpires).
sionally occur during the above sport a es as a consequence thereof. Knowing all risks of injury or death and to releas (its officers, employees, and agents) wh	ctivity; and that participants in the above sport activity of the risks involved, nevertheless, I have voluntarily applie te and hold harmless the above district (its officers, emp	ysical and/or strenuous exercise or activity; that serious accidents occocasional sustain mortal or personal injuries and/or property damaged to participate in said activity and I hereby agree to assume any an alloyees, and agents), and the Amateur Softball Association of Americal of omissions might otherwise be liable to me. It is further understood assigns.
· · · · · · · · · · · · · · · · · ·	and to hold the above district (its officers, employees, a ult of any injury and/or property damage that I may sust	and agents) free and harmless from any loss, liability, damage, cost, o tain while participating in said activity.
Signature:		Date:
Print Name:		