

City of Surprise Parks and Recreation Department Adult Volleyball Team Roster

Team Name: _____

Manager's Name: _____

	Name	Signature	Phone #	City, State
1				
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12				

Players must be listed on this roster to participate at any time. Change forms may be picked up/turned in to the site supervisor at the field or turned into the Parks & Recreation Office.

As a participant, or parent or guardian of a participant, permission is granted to participate in the City of Surprise activitie(s) and program(s) listed on this form. Participants understand and agree that they may be photographed and/or videotaped for promotional purposes. I understand that there are risks of physical injury to the participant(s). Considering all possible risks, on behalf of the participant(s) and myself, I voluntarily waive, release, discharge and hold harmless the City of Surprise, its employees, supervisors, appointed officials, agents, representatives and volunteers from all claims for injuries to participant(s), no matter how severe. Furthermore, I give consent for emergency treatment to the participant(s). The wavier does not extend to any such claims or liability that is caused solely and exclusively by the gross negligence of the City of Surprise or its employees, supervisors, appointed officials, agents, representatives and volunteers. I understand that requests for transfers, cancellations or refunds are subject to department policy and fees. . I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to myself or members of my group or organization, including, but not limited to, personal injury, disability, and death, illness, damage, loss, claim, liability, or expense, of any kind, that they or I may experience or incur in connection with participation in any event, program, activity, reservation or rental taking place at a City of Surprise facility, park, or property. I hereby release, covenant not to sue, discharge, and hold harmless the City of Surprise, its employees, agents, and representatives, of and from any and all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I further agree to indemnify and hold harmless the City of Surprise and its employees, agents, and representatives from any claim that may arise from or in connection with my or members of my group or organization's participation in any program taking place at a City of Surprise facility, park, or property. I understand and agree that this release includes any claims based on the actions, omissions, or negligence of the City of Surprise, its employees, agents, and representatives.

Manager's Signature: _____ **Date:** _____