Texas Amateur Athletic Federation Official Team Roster Form – <u>ADULT</u>

4	Hurst	Basketball	Men's		
Region	City	Sport Division		Team Name	
NOTE: 1.) Each player and team mana	ger should read the statement on Page 2 b	efore completing and signing this	roster.		
Print or Type Player's Name	Player's Signature		Residence y, State, Zip))	Phone	Texas Drivers Lic or Picture ID#
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					
PU1.					
PU2.					
PU3.					

*PU=Pickup player

TEAM MANAGER'S GUARANTEE: Each manager should read the statement on Page 2 before completing and signing this roster.

Manager's Name (Print or type)		Signature of Team Manager	Email address	Date	
Manager's Address (Print or type)		Home Phone			
City	Zip	Business Phone	Signature of local T.A.A.F. Representative	Signature of Region Director or Region Tournament Director (if applicable)	



PAGE 2

PARTICIPANT'S RELEASE AND WAIVER OF LIABILITY

I ("The Participant"), in consideration of my participation in the Texas Amateur Athletic Federation ("T.A.A.F.") Championship Competition hereby grant to T.A.A.F. the right to record, broadcast and otherwise exploit in any and all media throughout the world my performance in the T.A.A.F. Championship Competition and to use my name, likeness, voice and biographical information concerning me in connection therewith.

I assume all risks associated with my participation in the T.A.A.F. Championship Competition, and on behalf of myself, and my heirs, executors and administrators, in consideration of my participation in the T.A.A.F. Championship Competition, I hereby waive all claims against and release and hold harmless T.A.A.F., the sponsors of the T.A.A.F. Championship Competition (the "Sponsors"), and the host municipalities ("Hosts"), and their respective directors, officers, employees, agents, attorneys, successors and assigns, from and against any and all claims, damages, liabilities, causes of action, losses, costs and expenses, including reasonable attorneys' fees, arising out of or in connection with my participation in the T.A.A.F. Championship Competition, including without limitation, death, any personal injuries or loss of, damage to or loss of use of property, which I may incur as a result of my participation in the T.A.A.F. Championship Competition, including any death, personal injuries or loss of, damage to or loss of use of negligence on the part of T.A.A.F., and/or a Sponsor and/or the Hosts. I warrant that I am of legal age and that I have read and fully understand the foregoing terms.

TEAM MANAGER'S GUARANTEE

I represent and warrant that I am the Team Manager for the Team named on Page 1, that I am of legal age and that I depose and say that all of the information supplied on Page 1 is correct to the best of my knowledge and that all of the players signed the roster in their own handwriting and that they are eligible to compete with my team in the T.A.A.F. Championship play and agree to be bound by the rules and regulation of T.A.A.F. as contained in the Cavalcade of Sports.

REQUIRED GUARANTEE FOR CHURCH DIVISION

I represent and warrant that I am familiar with the membership roles of the church which this team represents and that all of the players on this roster (on Page 1) are actively involved in the religious endeavors of the said church and to the best of my knowledge each of the players are eligible to compete in the Church Division of T.A.A.F. championship play according to the rules and regulations of T.A.A.F. as contained in the Cavalcade of Sports.

Certified by Church Representative

Date:_____

Title:

Phone: ()_____

REQUIRED GUARANTEE FOR INDUSTRIAL DIVISIONS

I represent and warrant that I am familiar with the personnel records of the company which this team represents and that all of the players on this roster (on Page 1) are full time employees of the said company and to the best of my knowledge each of the players are eligible to compete in the Industrial Division of T.A.A.F. championship play according to the rules and regulations of T.A.A.F. as contained in the Cavalcade of Sports.

Certified by Church Representative

Date:_____

Title:

Phone: ()_____