

DES MOINES PARK AND RECREATION DEPARTMENT

OFFICIAL DES MOINES ATHLETIC LEAGUE ROSTER

TEAM NAME _____

LEAGUE NAME _____ YEAR _____

Note: I, the undersigned, agree that I am a member of the above named team. I am aware of all league and playing rules under which this league operates and in consideration for the right to use the facilities I agree to observe these rules and I further release the City of Des Moines, and the Des Moines Independent School District and its employees from any and all claims for personal injury, property damage or death occurring to members of the team or any other participants in the activity, inclusive of spectator activity arising out of the applied for use of park or facility. Team manager must inform players of rules.

Manager Name (print) _____ Signature _____

Home address _____ City _____ Zip _____

Cell Phone _____ Email _____

(Manager must also be listed below if he/she plays on the team)

1. Signature _____ Name (print) _____	Home address _____ Cell phone _____	Email _____	Zip _____
2. Signature _____ Name (print) _____	Home address _____ Cell phone _____	Email _____	Zip _____
3. Signature _____ Name (print) _____	Home address _____ Cell phone _____	Email _____	Zip _____
4. Signature _____ Name (print) _____	Home address _____ Cell phone _____	Email _____	Zip _____
5. Signature _____ Name (print) _____	Home address _____ Cell phone _____	Email _____	Zip _____
6. Signature _____ Name (print) _____	Home address _____ Cell phone _____	Email _____	Zip _____
7. Signature _____ Name (print) _____	Home address _____ Cell phone _____	Email _____	Zip _____
8. Signature _____ Name (print) _____	Home address _____ Cell phone _____	Email _____	Zip _____
9. Signature _____ Name (print) _____	Home address _____ Cell phone _____	Email _____	Zip _____
10. Signature _____ Name (print) _____	Home address _____ Cell phone _____	Email _____	Zip _____
11. Signature _____ Name (print) _____	Home address _____ Cell phone _____	Email _____	Zip _____
12. Signature _____ Name (print) _____	Home address _____ Cell phone _____	Email _____	Zip _____
13. Signature _____ Name (print) _____	Home address _____ Cell phone _____	Email _____	Zip _____
14. Signature _____ Name (print) _____	Home address _____ Cell phone _____	Email _____	Zip _____
15. Signature _____ Name (print) _____	Home address _____ Cell phone _____	Email _____	Zip _____
16. Signature _____ Name (print) _____	Home address _____ Cell phone _____	Email _____	Zip _____
17. Signature _____ Name (print) _____	Home address _____ Cell phone _____	Email _____	Zip _____
18. Signature _____ Name (print) _____	Home address _____ Cell phone _____	Email _____	Zip _____
19. Signature _____ Name (print) _____	Home address _____ Cell phone _____	Email _____	Zip _____
20. Signature _____ Name (print) _____	Home address _____ Cell phone _____	Email _____	Zip _____