



City of Loveland
 Parks and Recreation
 700 E 4th St
 Loveland, CO 80537

CITY OF LOVELAND – PARKS AND RECREATION ADULT ATHLETICS ROSTER

Revised February 27, 2014

SPORT: _____ DIVISION: _____ GENDER: _____ DAY OF PLAY: _____ LEAGUE NAME: _____

Team Name: _____ Sponsor: _____

(Our computer system allows for a team name up to 20 character spaces!)

Coaches Name: _____ Address: _____ City: _____ Zip: _____ Email: _____

Phone Number (Home) _____ (Work) _____ ext. _____ (Cell) _____

Another Contact: _____ Address: _____ City: _____ Zip: _____ Email: _____

Phone Number (Home) _____ (Work) _____ ext. _____ (Cell) _____

What Team were you last Year? _____ What League? _____

I, the below signed, agree that I will not hold the City of Loveland, Parks and Recreation Department Adult Athletics, it's officials, employees or agents responsible for any injury which may occur during my participation in this Adult Athletic activity and I hereby release the City of Loveland and all said persons from any liability whatsoever for all such injuries. Further, I have read and agree to abide by the Adult Athletic Code of Conduct.

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