ROSTER ADDITION FORM

PLEASANT HILL RECREATION & PARK DISTRICT

2010 SPRING SOCCER LEAGUE

ROSTER AGREEMENT, WAIVER & RELEASE FORM

MEN'S: ___ CO-ED: ____

WOMEN'S: ___

Date: _____

Team Name: _____ League & Night: _____

Team Rep: _____ Home Phone: _____ Work: _____

NOTE: Any player information left blank, invalidates that person as a legitimate player on this roster.

In consideration for being permitted by the above district to participate in the above activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance the above district (its officers, employees, and agents) from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this activity involves an element of risk and danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above persons or entities free and harmless from any loss, liability, damage, cost, or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said activity. I understand that no medical insurance is provided. I am eighteen years of age or older.

I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE ABOVE DISTRICT AND I SIGN IT OF MY FREE WILL.

Last Name, First (Print):		Signature:	
Street:	City:		Zip:
Phone:	Driver's License:	Birth Date: / /	

Last Name, First (Print):		Signature:	
Street:	City:		Zip:
Phone:	Driver's License:	Birth Date: / /	

Last Name, First (Print):		Signature:	
Street:	City:		Zip:
Phone:	Driver's License:	Birth Date: / /	