

2017 Adult Basketball Carson City Recreation Roster & Waiver/Release of Liability

Team Name: _____ Team Division _____

Team Manager _____ Managers Signature _____ Phone Number _____

Manager Address _____ City _____ State _____ Zip _____

Roster & Waiver/Release of Liability

In consideration of being allowed to participate in any way in the Carson City Adult Sports Program, related events and activities, the undersigned acknowledges, appreciates and agrees that:

- a. The risk of injury from the activities involved in the program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce the risk, the risk of serious injury does exist; and,
- b. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASES or others, and assume full responsibility for my participation; and,
- c. I willingly agree to comply with the stated and customary terms and conditions for participation. If I however observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official; and,
- d. I, for myself and on behalf of my heirs, assign, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Carson City, their officers, agents, officials and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and owners and lessors of the premises used to conduct events, WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASES.
- e. We further acknowledge that no person is authorized to participate unless he/she is a bona fide member of our team and has executed this document. If we, or any of us, should allow any other person to participate as an apparent member of our team,
- f. we agree to indemnify and hold harmless as previously stated, for any accident or injury that person may suffer during the course of participation, and such team accepts responsibility and/or discipline for their actions.
- f. I have read, understand, and acknowledge the Carson City Recreation Code of Conduct, and accept such responsibility, and consequence from the Carson City Code of Conduct.

	Name	Phone Number	Date of Birth	Participant Address	Signature
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12					

ALL PLAYERS MUST COMPLETE ROSTER/WAIVER FORM TO BE CONSIDERED A LEGAL PLAYER.