



# ADULT TEAM SPORTS ROSTER AND INDEMNIFICATION FORM

For Office Use Only:

Date Received: \_\_\_\_\_ Received By: \_\_\_\_\_

## Section I – Team Roster

Team Name: \_\_\_\_\_ Manager or Coach: \_\_\_\_\_

Jersey Number	Player Name	Street Address	City, State, Zip	Signature

## Section II – Indemnification and Authorized Signatures

I, the undersigned player, acknowledge, agree and understand that: Threats or assaults on any Department personnel, including officials will result in that person being ejected from the league and from any further participation in any activities offered by this department. Additional criminal charges will be filed against any person involved in this type of behavior. Profane or abusive language directed at an official, or arguing with an official, will not be tolerated. Such action will result in at least a one game suspension. Any player ordered out of a game by an official may be automatically suspended. Suspension length will be determined by severity of the incident and by the Athletic Director together with the officials' recommendation. Fighting among players before, during, or after a game, or on City property will result in being expelled from the league. Criticizing a player from another team will not be tolerated and may result in being ejected from the game. Voluntarily and of my own free will, I elect to participate as a member of the athletic team and league indicated below. I understand that there are certain risks and hazards involved in participating in adult sporting events that may result in injury or death to me and to other players, including, but not limited to those hazards associated with weather conditions, playing conditions, equipment and other participants. I understand that sliding into base is dangerous to me and to other players and may result in serious injury or death. I understand that the very nature of the game is hazardous and risky, including, but not limited to, the acts of pitching, throwing, fielding and catching of the ball, the swinging of the bat, running, jumping, stretching, sliding, diving, and collisions with other players and with stationary objects, all of which can cause serious injury or death to me and to other players. Further, I, the undersigned player, agree that in consideration for the right to play as a member of the team designated below and in consideration for the permission to play on the fields arranged for by the team or league: I voluntarily elect to accept and assume all risks of injury incurred or suffered by me (a) while practicing or playing as a member of the team so designated, (b) while serving in a non-playing capacity as a team member during practice or play by other teams or by other players on my team, and (c) while on or upon the premises of any and all of the gyms or fields arranged for by my team or league for practice or play. I release, discharge and agree not to sue the team and league designated below, the facility owner or other entity designated below, the City of Roanoke, the United States Specialty Sports Association, or their owners, officers, agents, servants, associations, employees, or any person or entity connected with the team, league, field, the City of Roanoke or United States Specialty Sports Association for any claim, damages, costs or cause of action which I have or may in the future have as a result of injuries or damages sustained or incurred by me from whatever cause including but not limited to the negligence, breach of contract or wrongful conduct of the parties hereby released.

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_