Adult Team Registration Form – Church MEN Spring 2010

Team Name:_____ ***League:***_____

Player Affidavit: Each player must read the following statement and sign the roster form before participating. Incomplete rosters will not be accepted.

I understand that by signing this roster I cannot play on another team in the same league, agree to abide by rules and regulations as set by WFPRD, and have read and understand each provision of the Waiver, Release of Liability and Indemnification Agreement on this form and agree to abide by them, and certify that the information provided is correct.

	Player Name (PRINTED)	Address *include street, city, and ZIP*	Home Phone	Work Phone	Signature
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MANAGER (name & address):_____

TELEPHONE: _____**(day)** _____**(home) EMAIL:**_____

I certify that the information given above is correct to the best of my knowledge. In addition, I verify that I am aware that it is my responsibility to inform my team members of the rules and regulations of the Wake Forest Parks and Recreation Adult Softball League.

Manager's Signature/Date: _____

Waiver, Release of Liability and Indemnification Agreement: *By signing this document, I hereby absolve the Town of Wake Forest and any individuals, groups, or organizations officially connected in any manner with the above-stated program of all liabilities including equipment loss, property damage, personal injury, or death. Such absolution is to be binding when the above individuals are acting within the scope of the activity. I hereby accept the supervision, facilities, and equipment as being satisfactory for the league named above. I understand that insurance coverage is my responsibility, and that I have read and agree to the terms stated above. I understand that my likeness may be captured by the Town of Wake Forest for use in promotional news or informational media and that my participation implies my consent.*