

Team Roster/ General Release Form

Rochester Avon Recreation Authority
 500 East Second Street Rochester MI 48307
 Phone 248.656.8308



ALL PARTICIPANTS MUST READ AND SIGN THIS FORM IN ORDER TO PLAY.

Basketball Team Roster

RELEASE, INDEMNIFICATION & HOLD HARMLESS:

The undersigned recognizes and acknowledges that there are certain inherent hazards and risks connected with activities and programs of the Rochester Avon Recreation Authority. The undersigned hereby (1) knowingly and voluntarily assumes full responsibility for such risks and hazards and, (2) agrees that I am bound by all terms and conditions of the Rochester Avon Recreation Authority rules and procedures. The undersigned is aware of the content of the programs and activities and hereby represents that the undersigned is physically, mentally and emotionally fit and capable of safely participating in such programs or activities. I agree as a condition of participation in programs or activities to release, defend, indemnify and hold harmless Rochester Avon Recreation Authority, its officers, agents, employees and volunteers harmless from and against any and all loss, judgments, damage and expense incurred by reason of any claim or liability based upon (1) personal injury (including death) or property damage to any person arising out of the negligent or intentional action of the undersigned, or (2) personal injury (including death) or property damage to the undersigned, except to the extent that such injury or damage is directly caused by the negligent acts or omissions of Rochester Avon Recreation Authority, its officers, agents, employees or volunteers.

TEAM NAME _____ MANAGER NAME _____

MANAGER EMAIL _____ (Needed for league Communication)

I have read, and understand the above stated rules for basketball. I hold my self responsible for any rule infraction, and understand the consequences.

	PLAYER NAME (PRINT)	PLAYERS SIGNATURE	CITY OF RESIDENCE	PHONE	EMAIL
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	PLAYER NAME (PRINT)	PLAYERS SIGNATURE	CITY OF RESIDENCE	PHONE	EMAIL
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