

ADULT WOMEN'S VOLLEYBALL TEAM ROSTER – POCATELLO PARKS & RECREATION
 DIVISION: RECREATIONAL / COMPETITIVE LEAGUE YEAR: _____

Team Name _____ Manager's Name _____
 Address _____ City _____ State _____ Zip _____
 Phone: Cell _____ Other _____ E-mail _____

Receipt # _____

I have carefully read this agreement, waiver, and release below and fully understand its contents. I am aware that this is a release of liability and a contract between myself and the City of Pocatello and that I sign of my own free will and choice.

	Player's Name <i>(Please Print)</i>	<input type="checkbox"/> If A Minor	Player's Signature / *Parent Signature Needed For Participants Under The Age of 18*	Phone Number(s)		Address / City / Zip
				Cell	Other	
1						
2						
3						
4						
5						
6						
7						
8						

AGREEMENT WAIVER, and RELEASE ATHLETIC LEAGUE

In consideration for me/my minor child being permitted by the City of Pocatello Parks and Recreation Department to participate in an athletic league named Adult Volleyball, I do hereby for myself, my heirs, executors, administrators, successors, & assigns, waive, release, acquit, and forever discharge the City of Pocatello, its employees, contracted game officials, all entities that provide practice facilities for the Adult Volleyball program or other persons whose services are contracted for in connection with the Adult Volleyball program from any and every claim, demand, right, or cause of action, property damage, personal injury, costs, expenses of any kind, and any compensation whatsoever ever, which I may ever assert by reason of my presence and/or participation in said program.

I understand that the Adult Volleyball program may be of a hazardous nature and/or include physical and/or strenuous exercise or activity; that serious accidents occasionally occur during the above sports activity; and that personal injuries and/or property damages as a consequence thereof. Knowing the risks involved, nevertheless, I have voluntarily applied to participate in said activity and I hereby agree to assume for me/my minor child all risks of injury or death and to release or hold harmless the City of Pocatello (its officers, employees, and agents) who might otherwise be liable to me.

I further agree to indemnify and to hold the City of Pocatello (its officers, employees, and agents) and all participating entities (and their officers, employees and agents) that provide facilities for the Adult Volleyball program, free and harmless from any loss, liability, damage, cost, or expense which I may sustain while I/my minor child am participating in the Adult Volleyball program.

I understand that I am responsible to provide my own health and accident insurance in the case that I/my minor child am injured while participating in the Adult Volleyball program. I understand that I must be at least 16 years of age in order to participate in the City of Pocatello Parks & Recreation Department's Women's Volleyball program. I also understand that if I am not at least 18 years of age, my parent or legal guardian must sign the release form on my behalf before I may participate in the program.