

## Raleigh Parks, Recreation and Cultural Resources Department Adult Roster

Team: \_\_\_\_\_ Division: \_\_\_\_\_ League: \_\_\_\_\_ Sport: \_\_\_\_\_

### Player Affidavit: Each Player Must Read The Following Statement And Sign Below Before They Can Participate

I understand that by signing this roster I am under contract to play for the above named team. I certify that the below information is correct, and I am aware that I cannot play on another adult team within the same division in the Raleigh Parks, Recreation and Cultural Resources Department League for the current season until properly released. I agree to abide by all rules and by-laws as set forth by the Raleigh Parks & Recreation Department. Furthermore, I acknowledge that I have read and that I understand each and every one of the provisions of the Waiver, Release of Liability and Indemnification Agreement listed on the back, and agree to abide by them. Additionally, I understand that Alcoholic Beverages and Weapons are not permitted on City Property.

	Player's Name	Email	Legal Address <small>(Street address, City, State, and Zip Code)</small>	Phone Number	Raleigh Resident	Player's Signature	Date	
							ADD	DROP
1					YES/NO Yes			
2					YES/NO Yes			
3					YES/NO Yes			
4					YES/NO Yes			
5					YES/NO Yes			
6					YES/NO Yes			
7					YES/NO Yes			
8					YES/NO Yes			
9					YES/NO Yes			
10					YES/NO Yes			
11					YES/NO Yes			
12					YES/NO Yes			
13					YES/NO Yes			
14					YES/NO Yes			
15					YES/NO Yes			
16					YES/NO Yes			
17					YES/NO Yes			
18					YES/NO Yes			
19					YES/NO Yes			
20					YES/NO Yes			

**All roster information must be typed, with the exception of signatures. No electronic signatures will be accepted**

I certify that I have investigated the information given above and found it to be correct to the best of my knowledge. In addition, I am aware that it is my responsibility to inform my players of all the rules and regulations of the Raleigh Parks, Recreation and Cultural Resources Department Adult League.

Manager's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Waiver, Release of Liability and Indemnification Agreement

I, the undersigned player, acknowledge, agree and understand that:

1. Voluntarily and of my own free will I elect to participate as a member of the team indicated on this roster in the City of Raleigh Adult League.
2. I understand that there are certain risks and hazards involved in participating in sports that may result in injury or death to me or other players, including but not limited to those hazards associated with weather, field/facility conditions, equipment, and other participants.
3. I understand that the very nature of athletic events is hazardous or risky, including, but not limited to the acts of pitching, throwing, fielding and catching the ball, the swinging of the bat, running, jumping, stretching, sliding, diving and collisions with other players or stationary objects, all of which can cause serious injury or death to me and to other players.

Furthermore, I, the undersigned player, agree that in consideration for the right to play as a member of the team designated on this roster and in consideration for permission to play at the facility arranged for by the team or league:

1. I voluntarily elect to accept and assume all risks of injury incurred or suffered by me (a) while practicing 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 players on my team, and while on or upon the premises of any and all of the facilities arranged for by my team or league for practice or play.
2. I release, discharge and agree not to sue the team designated on this roster, the City of Raleigh, the field owner, or their owners, officers, agents, servants, associations, employees or any person or entity connected with the team, league or facility for any claim, damages, costs or cause of action which I have or may have 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.

## Closed League Employment/Organization Membership Verification

I certify that the players listed above are employed by and work the required full time hours as required by our company, or the players listed above are members in good standing with our National Charter Organization.

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Personnel Director's / Organization Officer's Signature: \_\_\_\_\_

*(Must be made by someone who is not on the team)*

## Religious Institution League Verification

I certify that all of the above named players attend services at least three times a month.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Head Religious Institution Leader's Signature: \_\_\_\_\_

*(Must be made by someone who is not on the team)*

