

Team Name:			
League:	Season:	Year:	
Team Captain:	E-m	ail:	
Address:	City:	State:	Zip:
Cell Phone #: ()	Work	x Phone: () _	•
Co-Captain:	E-m	ail:	
Address:	City:	State:	Zip:
Cell Phone #: ()	Worl	x Phone: () _	

Waiver and Release of All Claims: (Must be signed)

Please, read this form carefully and be aware that in signing up and participating in this program, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this program (including transportation services/vehicle operation, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in this program, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in this program against the O'Fallon Park and Recreation Department including its officials, agents, volunteers, and employees (hereinafter collectively referred to as the Parks/Rec Dept.)

I do hereby fully release and forever discharge the Parks/Rec Dept. from any and all claims for injuries, damages or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with this program.

Warning of Risk: Recreational programs are intended to challenge and engage the physical, mental, and emotional resources of each participant. Despite careful and proper preparation, instruction, and medical advice, conditioning, and equipment, there is still a risk of serious injury when participating in any recreational program. Understandably, not all hazards and dangers can be foreseen. Depending on the particular activity, participants must understand that certain risks, dangers, and injuries due to inclement weather, slipping, falling, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, premises defects, inadequate or defective equipment, inadequate supervision, instruction or officiating, and all other circumstances inherent to indoor and outdoor recreational programs exist. In this regard, it must be recognized that it is impossible for the Parks/Rec Dept. to guarantee absolute safety.

**Roster must be completed and submitted to the Recreation Supervisor, Kristen Pelley, by the Captain's Meeting the week before the start of season. Final list of names must be completed by Game #3. Player signatures required before they can play. After Game 3, signatures can be added if the player's name is on the roster. Any additional players need to get league approval before adding to roster after Game #3.

Player's Full Name (Please Print)	Player's Signature	City of Residence	Date of Birth (01/01/2001)
1.			
2.			
3.			
4.			
5.			

Player's Full Name (Please Print)	Player's Signature	City of Residence	Date of Birth (01/01/2000)
6.			
7.			
8.			
9.			
10			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			