

## Roswell Recreation Department Team Registration Form

Staff Initial: _____
Date: _____
Fee: _____
Method: _____

Team Name \_\_\_\_\_ Sport \_\_\_\_\_

FULL NAME	SIGNATURE	AGE
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

**Anyone under the age of 18 must have a Parent Signature**

### Waiver

In consideration of acceptance of this registration form, my family and my heirs do waive and release any rights or claims for damages which I may have against the City of Roswell, all sponsors and individuals assisting in arranging and conducting these events and any of their agents, representatives, and assignees for any and all injuries, loss or damages suffered by me at or while traveling to this activity. I verify that I am physically fit and capable of playing in this event and have sufficiently trained for the competition of this activity. I realize that there are risks inherent to the activity and I am willing to accept the results of the risks.