



Mendocino Coast Recreation and Park District
300 S. Lincoln St. Fort Bragg, CA. 95437 (707) 964-9446

2018/19 16+ MENS BASKETBALL LEAGUE ROSTER AND RELEASE OF LIABILITY FORM

TEAM NAME: _____

MANAGERS NAME: _____

MANAGERS PHONE: (H) _____ (C) _____

MANAGERS EMAIL _____

**IT IS THE RESPONSIBILITY OF THE
MANAGER TO MAKE SURE THAT ALL
PLAYERS HAVE SIGNED THE ROSTER
AND PAID THEIR PLAYER FEE BEFORE
THEY STEP ONTO THE COURT!**

Team fees are \$400 per team and \$40 per player. Games will be held Sundays. Team fees and player fees are nontransferable and nonrefundable. The minimum player age is 16 years old.

The manager is responsible for each member of his team being familiar with the following Hold Harmless and Release of Liability and the accident or liability insurance is not included in team or player fees.

HOLD HARMLESS/ INDEMNIFICATION FOR ADULT ATHLETIC PARTICIPATION

In signing my name on this player roster form I realize that participation in this sport includes the possibility of injury to myself, fellow participants and non-participants

I understand that the MCRPD does not provide accident insurance to participants of this activity.

BASKETBALL PLAYER WAIVER AND RELEASE OF LIABILITY

I, the undersigned player acknowledges, agrees and understands that:

1. Voluntarily and of my own free will, I elect to participate as a member of the basketball team and league indicated on the front of this roster form.
2. I understand that there are certain risks and hazards involved in participating in basketball that may result in injury or death to me or other players, including, but not limited to, those hazards associated with weather conditions, playing conditions, equipment and other participants.

I further understand and agree that in consideration for the right to play as a member of the team designated on this roster form and in consideration for permission to play on the courts 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 or playing 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 other players on my team, and (c) while on or upon the premises of any and all of the courts arranged for by my team or league for practice or play.
2. I release, discharge and agree not to sue M.C.R.P.D. and its officers, volunteers, agents or employees, the team and the league designated below or any court on which basketball is practiced or played by my team, for any claim, damages, costs or cause of action which I have or may in the future have as a result of injuries or damages sustained or incurred by me.

I, the undersigned player, acknowledge that I have read and that I understand each and every one of the above provisions in this waiver and release form and agree to abide by them. Do not sign this form unless you have read, understood and agree to its terms. It contains important terms that could affect your legal rights if you have questions. Consult an attorney or legal advisor before you sign this document.



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ALL PLAYERS MUST SIGN BELOW, READ THE ATTACHED PAGE and PAY PLAYER FEES BEFORE THEY CAN PLAY!

TEAM NAME: _____

SIGNATURE ON THIS 16+ BASKETBALL LEAGUE ROSTER FORM ACKNOWLEDGES THAT YOU HAVE READ AND UNDERSTAND ALL OF THE PROVISIONS OF THE WAIVER AND RELEASE FORM ON THE REVERSE SIDE OF THIS FORM.

*IF A PLAYER IS UNDER THE AGE OF 18 BOTH THE PLAYER AND THEIR PARENT OR LEGAL GUARDIAN **MUST SIGN.***

| <u>NAME</u> <u>(write legibly)</u> | <u>SIGNATURE</u> | <u>PHONE NUMBER</u> | <u>DATE OF BIRTH</u> | <u>EMAIL</u> |
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