



**CITY OF MODESTO
PARKS, RECREATION AND NEIGHBORHOODS DEPARTMENT
OFFICIAL ADULT SOFTBALL ROSTER**

TEAM NAME _____ CLASS I.D # _____

LEAGUE/NIGHT/DIVISION _____

DATE _____ 20 _____

(Please print information)

	NAME	ADDRESS	CITY	ZIP
1.				
2.				
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4.				
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ROSTER AND CODE OF CONDUCT ACKNOWLEDGEMENT

I, manager of _____, certify that the information on this official roster is correct, and I have read and informed my team players of the City of Modesto's Code of Conduct.

I, the undersigned, understand that there will be no refunds unless the Recreation Department cancels the program. I further understand that I cannot transfer funds from one program to another, nor can I arrange for another person to take my place in the program.

As a participant, I am aware certain risks are inherent in the above activity. Nevertheless, to gain the City's permission to participate, it is my intention by signing this document to relieve the City, its management and employees from liability, and save them harm from any claims I may have for personal injury, property damage, or wrongful death caused by their negligence. I agree to allow use of my photograph or other recordings by the City for any purpose without obligation or liability to me. I have read and understood the registration and program policies and enter into this agreement of my own free will.

Manager's Signature _____

Manager's Name _____

Email (please print clearly) _____

Address _____ City/Zip _____

Day Phone Number () _____ Evening Number () _____

Assistant Manager's Name _____ Email _____

Day Phone Number () _____ Evening Number () _____

ROSTER INFORMATION MUST BE COMPLETED ON BOTH SIDES

<p>TO PAY BY VISA OR MASTERCARD (Please complete below)</p> <p>VISA MASTERCARD</p> <p>_____ (Print name as it appears on credit card)</p> <p>_____ (Card number)</p> <p>Expiration date: ____/____/____ CVV# ____</p> <p>_____ (Total Amount)</p> <p>_____ (Signature)</p>

**EACH PLAYER INDIVIDUALLY,
MUST SIGN & DATE THE ASSUMPTION OF RISK & RELEASE OF LIABILITY FOR INJURY OR DEATH.**

ASSUMPTION OF RISK AND RELEASE OF LIABILITY FOR INJURY OR DEATH

I understand that the sport and sport-related activities offered by the Parks, Recreation and Neighborhoods Department involve certain risks including, but not limited to, risks from body contact, falls and collisions, physical confrontation with fellow players and carelessness and negligence of fellow players, bystanders and City employees. I further understand that in order to gain the City's permission to participate in the sport, for which I have registered, I must assume such risks for myself.

I am fully aware that by signing this document I am shifting the legal liability for any such risks, including the negligence of the City, its management or employees, to myself so that I may participate in the sport I have chosen. I agree to hold them harmless from liability for my personal injury, property damage, or wrongful death caused by negligence, whether such losses occur during my participation in the sport, or during post-injury care.

I further acknowledge that I am familiar with the rules and regulations to be followed to use in the sport for which I have registered and, in particular, the rules and regulations relating to player conduct and agree to abide by those rules and regulations.

I also grant full permission to the City of Modesto, its employees, agents or assignees to use my name, photographs, video tapes or recording of the sporting event for which I am registered for any purpose without obligation or liability to me.

I acknowledge that I have read and understood all of the above.

**EACH PLAYER, INDIVIDUALLY MUST SIGN AND DATE THE
"ASSUMPTION OF RISK AND RELEASE OF LIABILITY FOR INJURY OR DEATH" BELOW**

	SIGNATURE OF PLAYER	DATE	LAST TEAM PLAYED FOR	YEAR	DIVISION
1.					
2.					
3.					
4.					
5.					
6.					
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**ANY TEAM FALSIFYING "RELEASE OF LIABILITY" SIGNATURES WILL BE DROPPED
FROM THE LEAGUE AND WILL FORFEIT ENTIRE LEAGUE ENTRY FEE.**