



**Parks & Recreation Department
ADULT TEAM ROSTER**

TEAM: _____ LEAGUE: _____ DATE: _____

Player Affidavit: Each player must read the following statement before completing and signing below.

I understand that by signing this roster that I am under contract to play for the above named team. I am aware that I cannot play with any other team in a league sponsored by the Gastonia Parks & Recreation Department for the current season until properly released. I agree to abide by all rules and by-laws as set forth by the Gastonia Parks & Recreation Department. Furthermore, I assume all responsibility for all risks and hazards incidental to this activity, and transportation to and from this activity, and I do further release, absolve, indemnify, and hold harmless the City of Gastonia Parks & Recreation Department, its agents and employees, and the City of Gastonia, its agents, officers and employees from any claims, causes of action, loses, injuries or damages or costs in any way associated with known or unknown injuries to person or property which may result from my participation in this activity.

PRINT NAME	SIGNATURE	E-MAIL	MAILING ADDRESS	CITY, STATE & ZIP	PHONE #
1-					
2-					
3-					
4-					
5-					
6-					
7-					
8-					
9-					
10-					
11-					
12-					
13-					
14-					
15-					
16-					
17-					
18-					
19-					
20-					

I certify that I have investigated the information given above and found it to be correct to the best of my knowledge.

Managers Name: _____ Managers Signature: _____ Home Phone #: _____ Cell Phone #: _____
 Work Phone #: _____ Address: _____ City: _____ State: _____ Zip: _____
 E-Mail Address: _____