LAWRENCE PARKS & RECREATION

Lawrence Parks and Recreation
(785) 832-7922
TEAM ROSTER

AME OF TEAM: _____ LEAGUE: _____ DIVISION: _____

Print or Type Name:	Player's Signature:	Parent/Guardian Signature for Players under 18	Address:	Phone Number:

ll players must SIGN roster:

consideration of your acceptance of this entry, I hereby, for myself, my heirs, my executors and administrators, waive any and all rights and claims for damages I may have against the onsors, coordinating groups and any individuals associated with the event, their representatives, successors and assignees for all injuries suffered by me in connection with said event. so, none of the above are responsible for the loss of personal items nor any other form of aggravation in connection with said event. I recognize that there may be potential hazzards in this tivity. I am in good enough physical condition to participate in this activity. In filling out this form, I acknowledge that I am an amateur in such events. I also give permission for the free use my names and picture in any brodcast, telecast or print media account of this event. In filling out this form, I acknowledge I have read and fully understand my own liability and do accept e restrictions.

anager's Signature:_____ Home Phone: _____ Work Phone: _____

ddress: _____ City/State/Zip: _____