

# TEAM ROSTER – HOLD HARMLESS AGREEMENT

I agree to play with the below mentioned team for the playing season 20\_\_\_\_, or until released by such team according to the rules and regulations of the Fairview Park & Recreation Adult Sports Leagues, a copy of which is available at The Gemini Center at 21225 Lorain Road, Fairview Park, Ohio 44126. I further agree to release the Fairview Park and Recreation Adult Sports Leagues, the Gemini Center, and the person firm or corporation backing of this team from all liabilities and from any injuries sustained or incurred by me while participating in activities of the Fairview Park and Recreation Department.

|   |
|---|
| League: _____   |
| <b>Manager Name:</b> _____ <b>Phone:</b> _____<br><i>(If manager participates in games, complete information below as well)</i> |

**TEAM NAME:** \_\_\_\_\_

| Player's Name | Phone | Address<br>City, State, Zip | Signature |
|---------------|-------|-----------------------------|-----------|
| 1.            |       |                             |           |
| 2.            |       |                             |           |
| 3.            |       |                             |           |
| 4.            |       |                             |           |
| 5.            |       |                             |           |
| 6.            |       |                             |           |
| 7.            |       |                             |           |
| 8.            |       |                             |           |
| 9.            |       |                             |           |
| 10.           |       |                             |           |
| 11.           |       |                             |           |
| 12.           |       |                             |           |
| 13.           |       |                             |           |
| 14.           |       |                             |           |
| 15.           |       |                             |           |
| 16.           |       |                             |           |
| 17.           |       |                             |           |
| 18.           |       |                             |           |

I, \_\_\_\_\_ being the team manager of the above-mentioned team, do certify that all signatures on this official team roster are original that only those individuals signing the above shall participate in team activities and that failure to have player personally sign the roster may subject the manager and player to suspension.

|   |                      |
|---|----------------------|
| Official Team Roster is void unless countersigned by the Program Coordinator. |                      |
| Program Coordinator: _____  | Date Received: _____ |