

Team Roster: (please list all players and phone numbers for your team below, minimum of 10 players, with equal numbers of men and women.)

Team Name: _____

I hereby acknowledge that such participation presents risks, some of which are unknown; I agree to assume all risks associated with such participation. I do, on behalf of my child/ward and any person who may have an interest in his/her well-being or property, hereby release and forever discharge the City of Spirit Lake, Idaho, its agents, servants, employees and cooperators from any and all real possible claims for damages or other harm to person or property, regardless of the manner by which any such claim may be brought. I accept the terms of this complete and total release and agree to be bound by it of my own free will. I hereby consent to first aid, emergency, medical care, and authorize, if necessary, admission to a hospital for treatment of injuries that myself or my child/ward could sustain while participating in this program. I understand that I am responsible for any and all medical expenses which may be incurred as a result of any accident or illness while participating in the program. I am the parent or legal guardian or the above-named participant, who is referred to in this agreement as child/ward. My approval of this agreement means that I cannot later bring a claim for damages against the City of Spirit Lake and/or any cooperators in this program.

<u>NAME</u>	<u>SIGNATURE</u>	<u>SHIRT SIZE</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____
11. _____	_____	_____
12. _____	_____	_____
13. _____	_____	_____
14. _____	_____	_____