

## STONE BANK COMMUNITY PARK & RECREATION CLUB, LLC 2019 SAND VOLLEYBALL LEAGUE WAIVER FORM AND OFFICIAL TEAM ROSTER

TEAM NAME: \_\_\_\_\_ TEAM CITY: \_\_\_\_\_

Manager's name \_\_\_\_\_ email \_\_\_\_\_

Address: \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Manager home phone \_\_\_\_\_ Manager Cell: \_\_\_\_\_

Assistant coach name \_\_\_\_\_ cell # \_\_\_\_\_

Assistant Coach Name \_\_\_\_\_ cell # \_\_\_\_\_

Age Group - Adult \_\_\_\_\_ All Players are/will be 18 years old and physically able to play before June 1st

Indicate if you are willing to have individual players assigned to your team: \_\_\_\_\_ Yes \_\_\_\_\_ No

Any Questions contact **Sam Eastman** via text at **262-225-9047** or via email at **eastmans@mylakecountryschool.org**

Fee is \$20 per person or a max of \$150/team up to 12 members  
females on Court at all time

All teams are Co-ed and must have 2

**READ BEFORE SIGNING:** In consideration of being allowed to participate in any way in this league, the undersigned acknowledges, appreciates, and agrees that:

The risk of injury from the activities involved in the program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce the risk, the risk of serious injury do exist and,

I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume all responsibility for my participation; and

I willingly agree to comply with the stated and customary terms and conditions for participation. If however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately, and

I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS the Stone Bank Community Park and Recreation Club LLC, Stone Bank Youth Baseball, Richie Clark Foundation, Stone Bank School, and other officials of the League and its premises used to conduct the event (Releases), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

PLAYER NAME (please print)	D.O.B.	PLAYERS SIGNATURE	E-mail Address	Cell Phone Number
1.		I HAVE READ THIS RELEASE	I HAVE READ THIS RELEASE	
2.		I HAVE READ THIS RELEASE	I HAVE READ THIS RELEASE	
3.		I HAVE READ THIS RELEASE	I HAVE READ THIS RELEASE	
4.		I HAVE READ THIS RELEASE	I HAVE READ THIS RELEASE	
5.		I HAVE READ THIS RELEASE	I HAVE READ THIS RELEASE	
6.		I HAVE READ THIS RELEASE	I HAVE READ THIS RELEASE	
7.		I HAVE READ THIS RELEASE	I HAVE READ THIS RELEASE	
8.		I HAVE READ THIS RELEASE	I HAVE READ THIS RELEASE	
9.		I HAVE READ THIS RELEASE	I HAVE READ THIS RELEASE	
10.		I HAVE READ THIS RELEASE	I HAVE READ THIS RELEASE	
11.		I HAVE READ THIS RELEASE	I HAVE READ THIS RELEASE	
12.		I HAVE READ THIS RELEASE	I HAVE READ THIS RELEASE	

**TEAM MANAGER/COACH AFFIDAVIT:** I, the manager/coach of the above team, do hereby state that all of the information supplied above is correct to the best of my knowledge. I further agree that each player is eligible to compete with my team in the specific events at Stone Bank Community Park during 2017.

MANAGER/COACH SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

**IMPORTANT:** Each team manager/coach shall be responsible to keep legal copies of birth certificates, etc., at all times in case of protest.