New Albany Parks & Recreation 7860 Bevelhymer Road, New Albany OH 43054 Phone: 614/939-7275 Fax: 614/939-7280

TEAM ROSTER FORM: Please have the captain of the team fill out the team roster form. We will need to know who will be on your team and a signature from each player for waiver of liability. Teams cannot play until this roster form is submitted to the Parks office.

| # | Name | Gender | Street Address | Zip | Email | Signature | Res. /Non-Res. |
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Resident teams are defined as having at least 70% residents. Residency is defined by living within the NA Plain-Local School District.

Waiver of Liability:

The undersigned agrees that they are at least 18 years of age, and agree to be a member of the New Albany Parks CO ED Softball League. The signer agrees to assume all risks associated with the participant's membership in this league. Signer recognizes that basketball is an active sport, which may result in harm or injury to the participants. By signing this agreement I (as well as my heirs, executors, or administrators) hereby waive, release and forever discharge NA Joint Park District, it's staff, employees, sponsors, and contractors from all rights and claims from damage, injury, or loss to person or property which may be sustained or occur during participation in games/practices or while attending games/practices or coming from or going games/practices, whether or not loss, damages or injury is due to negligence or any other reason.

I certify that I or the said team members to be physically and mentally capable of participating in basketball and any related activities. I hereby give permission for any staff member, coach, employee, or official to seek medical attention for above mention minor during the course of the season, in the event of an accident, injury, or illness. I will be responsible for any and all costs associated with the medical attention and treatment.

| Print Name | Signature | Date_ | |
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