

**Winter Adult Basketball
FARGO PARK DISTRICT ROSTER**

LEAGUE: _____

November 2011-March 2012

***CAPTAINS:** I HEREBY ACCEPT FULL RESPONSIBILITY FOR THE CONDUCT OF ALL INDIVIDUALS ON THIS ROSTER CONNECTED WITH THIS TEAM IN THE FARGO PARK DISTRICT LEAGUES.

Captain's Name _____ Team Name _____

Address _____ City _____ State _____ ZIP _____

Email _____ Daytime Phone # _____ Home Phone # _____

WAIVER: THE UNDERSIGNED PARTICIPANTS in consideration for the Fargo Park District and Courts Plus Fitness Center providing facilities, equipment, and supervision in this activity for which he/she has registered does hereby: 1. Assume all risks and responsibility of possible damage or injury involved through participation in this program. I understand I am to furnish my own insurance in case of injury. 2. I certify that I am in good health and capable of participation in this activity. 3. I agree to indemnify and hold harmless the Fargo Park District from liability resulting from my participation in this program. 4. I understand that all players signed below are 16 years or older for Fargo Park District Adult Programs.

	<u>NAME</u> (PRINT LEGIBLE)	<u>ADDRESS</u>	<u>PHONE</u>	<u>SIGNATURE</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____
7.	_____	_____	_____	_____
8.	_____	_____	_____	_____
9.	_____	_____	_____	_____
10.	_____	_____	_____	_____
11.	_____	_____	_____	_____
12.	_____	_____	_____	_____
13.	_____	_____	_____	_____
14.	_____	_____	_____	_____
15.	_____	_____	_____	_____

***PLEASE TURN ROSTER IN TO SCOREKEEPER OR SUPERVISOR prior to the start of your first game!**