League Roster

Rochester Park & Recreation Department
201 4 ST S.E. – Room 150
Rochester, MN 55904 (507) 328-2525

Select One:	Select One:	Select One:	
❑ Men's ❑ Women's ❑ Co-ed	❑ Spring 2019 ❑ Summer 2019 ❑ Fall 2019 ❑ Winter 2018/19	❑ Volleyball ❑ Softball ❑ Fast Pitch ❑ Kickball	❑ Football ❑ Basketball ❑ Broomball ❑ Dodgeball

TEAM NAME:_____

PREFERRED NIGHT: _____

LEAGUE:_____

TEAM NAME LAST YEAR: _____

NEW TEAM_____**YES** _____**NO**

MANAGER: _____

PHONE#_____/ _____
(HOME) (WORK)

ADDRESS:_____

_____

E-MAIL ADDRESS _____

_____

WAIVER: Every reasonable effort will be made to ensure safety and integrity of the facilities provided, but neither the City of Rochester nor its staff assumes responsibility for any personal injury or other damages sustained by any participant, in return for the opportunity to participate in programs sponsored by the Park and Recreation Department. I acknowledge that my participation is voluntary, that the activity is not an essential service provided by the City, and that there are certain risks (including risks of personal injury) associated with this activity. By signing this form, I hereby assume all risks associated with the activity and release and hold harmless the City of Rochester waiving any right to make claims or bring lawsuits against the City or anyone working on behalf of the City for any injuries or damages related to the alleged negligence of the City. This wavier does not apply to any injuries or damages that are the result of any willful, wanton, or intentional conduct by the City or anyone acting on its behalf. I have read and fully understand this waiver, and have executed it voluntarily so I may be allowed to participate in programs sponsored by the Park and Recreation Department.

PHOTO/VIDEO RELEASE: I hereby give permission to the City of Rochester to use photographs/videos taken of me during this league's season for promoting, publicizing, and advocating City of Rochester buildings, services, programs, and attractions. I release the City of Rochester from all claims for financial compensation now and in the future. I understand that my name will not be used. Photographs and/or videos may appear in brochures, slide presentations, newspaper articles, and City of Rochester websites. I acknowledge that, by signing this Release, I have read this entire Agreement, I understand it completely, and I agree to be bound by its terms.

PLEASE PRINT AND SIGN YOUR NAME BELOW. **** (All players must be 17 years of age and above.)****

NAME OF PLAYER	HOME ADDRESS	PHONE NUMBER	PLAYER SIGNATURE **must be signed by each player. Can be signed during registration or prior to participation.*

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