



Acworth Adult Basketball League Roster

Team Captain: _____ **Team Name:** _____

The following players will represent my team in the Acworth Adult Winter Basketball League. These players have agreed to abide by all the rules as outlined in the League Manual, and all the policies set by the Acworth Parks, Recreation & Community Resource Department.

RELEASE AND HOLD HARMLESS AGREEMENT
PERMISSION TO PROVIDE EMERGENCY MEDICAL TREATMENT

Realizing the nature of this program, its physical demands and how important it is to follow rules, regulations, and instructions outlined by the staff of the City Of Acworth, Parks, Recreation & Community Resource Department, I am, to the best of my knowledge, in good health and able to participate in the program. I authorize the staff of the City Of Acworth, Parks, Recreation & Community Resource Department to organize any required medical or first aid procedure, or to take the undersigned to a hospital emergency room for treatment. If any treatment is required, I understand that every effort will be made to notify the individual indicated as emergency contact beforehand by telephone.

I release, indemnify, and hold harmless the City of Acworth, its employees, volunteers, officials and the Acworth Parks, Recreation & Community Resource Department. In the case of injury I waive all claims against the City of Acworth, its employees, volunteers, officials and the Acworth Parks, Recreation, & Community Resource Department. I release the City of Acworth, its employees, volunteers, officials and the Acworth Parks, Recreation & Community Resource Department of any and all claims, demands, and causes of action whatsoever kind and nature arising from my participation in this program. I hereby covenant not to sue those named herein and I do hereby further state that neither I nor my heirs, executors, assigns and transfers will ever sue at any time the City of Acworth, its employees, volunteers, officials and the Acworth Parks, Recreation & Community Resource Department for negligence or liability of any type on their behalf or from another participant in this program. The undersigned agrees, as a further consideration and inducement for this release and indemnity agreement, that it shall apply to all unknown and unanticipated injuries and damages directly and indirectly resulting from the said accident, as well as to those now disclosed. The undersigned hereby acknowledge(s) receipt of a copy of this release before signing it.

	NAME	JERSEY#	PHONE NUMBER	EMAIL ADDRESS	SIGNATURE
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	NAME	JERSEY#	PHONE NUMBER	EMAIL ADDRESS	SIGNATURE
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***NOTE* All players are subject to I.D. checks if requested by the League Coordinator/City Staff.**