

ATHLETIC TEAM ROSTER

TOURNAMENT: *Donna Jones Memorial Women Rock Co-Ed Softball Tournament*

TEAM NAME: _____ DATE: _____

In electing to participate, I acknowledge that there are risks in the program and that there is a possibility of injury to me or damage to the equipment I provide for myself, all of which is incidental to the program. I hereby acknowledge that I am assuming all of the risks and hazards incidental to the program. Therefore, I:

1. Agree to waive any and all claims against Women Rock, Inc., the City of Sherman, Texas, and/or the City of Denison, Texas for personal injury and property damage experienced by me arising out of my participation in the program identified above and agree to release Women Rock, Inc. and/or the City of Sherman, Texas from liability associated therewith;
2. Agree to save and hold Women Rock, Inc., the City of Sherman, Texas, and/or the City of Denison, Texas, its officers, employees and volunteers harmless from any and all loss, personal injury liability, property damage, or claim for personal injury or property damage incurred by me arising out of my participation in the program identified above or my use of facilities and equipment provided by Women Rock, Inc., the City of Sherman, Texas, and/or the City of Denison, Texas whether such loss is alleged to be by omission or commission of Women Rock, Inc., the City of Sherman, Texas, and/or the City of Denison, Texas, its officers, employees and volunteers; and
3. Agree to indemnify Women Rock, Inc., the City of Sherman, Texas, and/or the City of Denison, Texas, its officers, employees and volunteers for any and all losses, expenses, and costs of defense incurred by Women Rock, Inc., the City of Sherman, Texas, and/or the City of Denison, Texas, its officers, employees and volunteers which arise out of any claim against me arising from my participation in the program identified above.

PLEASE PRINT CLEARLY

By participating, I allow Women Rock, Inc., Sherman Parks and Recreation, and/or Denison Parks and Recreation to use my image or likeness in any Women Rock, Inc., Sherman Parks and Recreation, or Denison Parks and Recreation publication or website. My image may not be used or given for anything outside Women Rock, Inc., Sherman Parks and Recreation, or Denison Parks and Recreation publications or websites.

Team Representative's Name: _____

Team Representative's Phone: _____

Team Sponsor's Name: _____

By signing below, I acknowledge that I have read, understand and agree with all of the foregoing, understand its importance, and voluntarily execute this application

Player's Name (print)	Player's Signature	Address	Phone	Email
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____
6. _____	_____	_____	_____	_____
7. _____	_____	_____	_____	_____
8. _____	_____	_____	_____	_____
9. _____	_____	_____	_____	_____
10. _____	_____	_____	_____	_____
11. _____	_____	_____	_____	_____
12. _____	_____	_____	_____	_____