

1

Team Captain and Co-Captain Information

(Please check) City of Maricopa Resident (live within city limits)
 Non-Resident (other cities)

1)

Full Name _____ Phone Number _____

2)

Full Name _____ Phone Number _____

TEAM NAME _____

2

To the extent allowed by law, I hereby absolve the City of Maricopa and GsportsAz, its employees, agents, independent contractors, and officers from all liability which may arise as the result of my/our participation in activities I or any member of my family attends or registers into; and, all players on the this roster have acknowledged to have a confirmed and signed waiver for his or her participation as indicated and in so doing absolve the City of Maricopa, Copper Sky Recreation Center, its employees, agents, independent contractors, and officers from such liability. I am aware that if I have registered for a class involving physical activity, I have taken care to enroll at a class level appropriate to my/our physical abilities and/or medical condition. I release use of my/our photos taken during program participation from all and any claims and demands resulting from their use in program publicity. Also, all players signing this team roster agrees to have reviewed and will obide by the Copper Sky Facility Code of Conduct and the Adult Sports Code of Conduct, provided by the League Coordinator.

TEAM ROSTER - ALL PLAYERS MUST BE 18 YEARS OLD, 16 WITH PARENTAL CONSENT AND SIGNATURE

3

Player Name (Please include all participant)	City, Zip Code	Birthdate (MM/DD/YYYY)	Phone Number	Signature
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3			()	
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11			()	
12			()	
13			()	
14			()	
15			()	