2025 Roster and Liability Release

WAIVER OF LIABILITY AND TEAM ROSTER

By the placement of your name and signature on this Roster, you state and hereby agree to release and forever discharge the Inverness Metropolitan Improvement District, Inverness Recreation Department, the Inverness Recreation Director, and all agents and employees thereof, from all liability, claims, demands, costs, charges, and expenses incident to property damage and/or personal injury sustained, or which may be sustained in the future, as a result of my participation in any Inverness Recreation Program due to the ordinary negligence of any of the above-named parties. Furthermore, I am aware, as a general matter, that participation in recreational programs entails certain risks of personal injury. I expressly assume the risk that I may be injured as a result of my participation, which injury may be reasonably foreseeable given the nature of the sports in which I will participate, occur in the ordinary course of my participation in the recreational program, and which may not be attributable to anyone's negligence.

I have read and understood the paragraph above and further understand that my signature below will release the above-named parties from liability for any claim for property damage or personal injury which result from their ordinary negligence or from the risks I have expressly assumed by my participation in any Inverness Recreation Program. I also understand that this document will bar not only any claim(s) I may make but also any claims which may be made on my behalf by heirs, legal representatives and assigns as a result of the same incidents of property damage or personal injury.

TEAM CAPTAIN:Contact Information email:	TEAM NAMEPhone:
Wednesday Night, 7-3 Coed Softball	Circle One Thursday Night, 4-2 Coed Volleyball
NAME (PRINTED) SIGNAT	URE & DATE
1	
6	
9	
10	