



TEAM REGISTRATION FORM

SPORT REGISTERING FOR: _____

COACH/CONTACT: _____

TELEPHONE NUMBER: _____

EMAIL ADDRESS: _____

ROSTER:

Name	Phone	Email

SIGNATURE OF COACH/CONTACT: _____ DATE: _____

TEAM NAME: _____

SHIRT COLOR REQUESTED: _____

Waiver for Participant:

By signing below, I hereby for myself, waive and release any and all rights and claims for damages I or my child may have while participating in a St. Marys Recreation Department program or sport. I assume all risks and hazards incidental to participation and I waive, release, resolve, indemnify and agree to hold harmless the St. Marys Recreation Department, the City of St. Marys and its organizers, sponsors, and supervisors.

Signature	Shirt Size	Date Paid

Roster will not be accepted without full payment.