

TEAM NAME \_\_\_\_\_  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 HOME PHONE WORK PHONE CELL PHONE E-MAIL ADDRESS

I, The undersigned player, acknowledge, agree and understand that I: Voluntarily and of my own free will, elect to participate as a member of the team listed above. I understand that there are certain risks and hazards involved in participating that may result in injury or death to me or other players. I understand that playing on a hardwood court or on a field is dangerous to me and other players and may result in serious injury or death. I understand that the very nature of the game is hazardous and risky, including but not limited to, the acts of running, jumping, stretching, diving, collisions with other players and with stationary objects, all of which can cause serious injury or death to me and to other players. Further, I the undersigned player agree that in consideration for the right to play as a member of the team designated above and in consideration for permission on the gym or field arranged for by the team or league, I voluntarily elect to accept and assume all risks and of injury incurred or suffered by me a.) while practicing or playing as a member of the team so designated, b) while serving in a non-playing capacity as a team member during practice or play by other teams or by players on my team, and c) while on or upon the premise of any and all of the gyms or fields arranged for by my team or league for or play. I release, discharge and agree not to sue the team and the league designated above, the gym owners or other entity designated below, the officers, agents, servants, associations, employees, or any person or entity connected with the team, league, gym, field or The City of Stamford, for any claim, damages, costs or cause of action which I have or may in the future have as a result of injuries or damages sustained or incurred by me from whatever cause including but not limited to the negligence, breach of contract or wrongful conduct of the parties released. I **ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND EACH AND EVERY ONE OF THE ABOVE PROVISIONS IN THIS WAIVER, RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT AND AGREE TO ABIDE BY THEM.**

	PLAYERS NAME	PLAYERS SIGNATURE	INITIAL	DATE	ADDRESS/COMPANY	WORK PHONE	HOME PHONE
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