

CLOVER PARKS & RECREATION DEPARTMENT

TEAM: _____ LEAGUE: _____ DATE: ____/____/____

PLAYER AFFADIVIT: Each player must read the following statement before completing and signing below

I understand that by signing this roster that I am under contract to play for the above named team. I am aware that I cannot play with any other team in a league sponsored by the Clover Parks and Recreation Department for the current season until properly released. I agree to abide by all rules and bylaws as set forth by the Clover Parks and Recreation Department. Furthermore, I assume all responsibility for all risks and hazards incidental to this activities and transportation to and from this activity, and I do further release, absolve, indemnify, and hold harmless the Clover Parks and Recreation Department, its agents and employees and the Town of Clover agents, officers and employees from any claims, causes of action, losses, injuries or damages or costs in any way associated with known or unknown injuries to persons or property which may result from my participation in this activity.

	Name	Signature	Town Resident	Phone Contact	Email Contact
1			Yes No		
2			Yes No		
3			Yes No		
4			Yes No		
5			Yes No		
6			Yes No		
7			Yes No		
8			Yes No		
9			Yes No		
10			Yes No		
11			Yes No		
12			Yes No		
13			Yes No		
14			Yes No		
15			Yes No		
16			Yes No		
17			Yes No		
18			Yes No		
19			Yes No		
20			Yes No		

I certify that I have investigated the information given above and found it to be correct to the best of my knowledge.

Manager Name _____

Manager's Signature _____

Address _____

State _____

Zip _____

Phone _____

