Glendale Community Services & Parks Sports Department, 2200 Fern Lane Glendale, Ca. (818) 548-6420

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Please Check One Men's Basketba		PUKIS KUSII	EK - DASKE	IDALL
Team Name/Manager In		-		
Team name	Manager name	Manager address		Home phone
		City, Zip		Work phone
Sponsor (if any)	Co-manager name, if applicable	Manager address		Home phone
		City, Zip		Work phone
to me as a result of participa to me as a result of participa at it is my intention by signing wrongful death caused by ne during participation in sports Glendale for any injuries that loss, damage, or injury that I agree that in the event any employees, I shall defend, in wherever made or presented In voluntarily participating it	this instrument to exempt and relieve the City egligence. I am fully aware of the risks and has programs and that participants in sports program away occur to me during participation in the may be sustained by me during participation in claim for personal injury, property damage, or demnify and save harmless the City of Glendard. In the sports program, I assume all risks associons the sports program, I assume all risks associons.	of Glendale, its officers, a zards inherent in participa grams can suffer serious inj Sports program. Neverthen the Sports program or any or wrongful death shall be pale or any of its officers, against with the participation	agents, servants or employers, servants or employers, servants or employers. I realize that no mess, hereby elect volundy activities incidental theorosecuted against the Cogents or employees from in the program.	gross negligence of any of said persons, or otherwise, occurringly occur and for whatever period said activities may continue. oyees from liability for personal injury, property damage or am, I understand that serious accidents occasionally occur edical insurance or other insurance is provided by the City of tarily to participate in the Sports program and assume all risk of ereto. City of Glendale, or any of its officers, agents, servants or any and all such claims or causes of action by whomever or not entitled to coverage under the City's workers' compensation
insurance. I understand that this hold ha	armless and assumption of the risk agreement	shall apply not only to me	but also to my heirs, ex	ecutors, administrators, next of kin, assigns and successors.
I acknowledge that I have re the legal consequences of sig		pletely advised of the pote	ntial dangers incidental	to participation in the Sports program and I am fully aware of
	certify that I am eighteen (18) years of ag			
I hereby certify that all in	nformation is correct and is in no way fals	ified.	İ	
Signature of Manager		Date		

By your signature on this roster you agree to all the provisions of the <u>Hold Harmless</u> agreement. This agreement may not be waived.

By your signature on this roster you agree to all the provisions of the <u>Hold Harmless</u> agreement. This agreement may not be waived.

Coach/Player name	Signature	Home address	Home phone
		City, Zip	Work phone
2. Coach/Player name	Signature	Home address	Home phone
		City, Zip	Work phone
3. Coach/Player name	Signature	Home address	Home phone
·		City, Zip	Work phone
Coach/Player name	Signature	Home address	Home phone
•		City, Zip	Work phone
5. Coach/Player name	Signature	Home address	Home phone
·		City, Zip	Work phone
6. Coach/Player name	Signature	Home address	Home phone
·		City, Zip	Work phone
7. Coach/Player name	Signature	Home address	Home phone
•		City, Zip	Work phone
8. Coach/Player name	Signature	Home address	Home phone
·		City, Zip	Work phone
9. Coach/Player name	Signature	Home address	Home phone
		City, Zip	Work phone
10. Coach/Player name	Signature	Home address	Home phone
		City, Zip	Work phone
11. Coach/Player name	Signature	Home address	Home phone
		City, Zip	Work phone
12. Coach/Player name	Signature	Home address	Home phone
		City, Zip	Work phone
13. Coach/Player name	Signature	Home address	Home phone
		City, Zip	Work phone
14. Coach/Player name	Signature	Home address	Home phone
		City, Zip	Work phone
15. Coach/Player name	Signature	Home address	Home phone
		City, Zip	Work phone
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