

# North Port Parks & Recreation

## Adult Basketball League

1602 Kramer Way, North Port, FL 34286

(941) 240-8125 (941) 426-7605 - FAX

DIVISION:     A League     B League     30 and over League

MANAGER'S NAME \_\_\_\_\_

TEAM NAME \_\_\_\_\_ JERSEY COLOR \_\_\_\_\_

ADDRESS \_\_\_\_\_  
 \_\_\_\_\_

### TEAM ROSTER ADULT BASKETBALL LEAGUE

FIRST & LAST NAME (please print)	STREET ADDRESS, CITY, ZIP CODE	T-SHIRT SIZE	PHONE (w/ area code)	AGE	SIGNATURE
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

*\*Players must be 18 years of age before the season starts and must be out of High School to participate.*

Comments:

### WAIVER AND RELEASE OF LIABILITY

In consideration of your accepting my registration for participation, I hereby, for myself, my dependents, executors and administrators, waive and release any and all rights and claims, which may result from this participation, against the City of North Port and its representatives, sponsors, successors and assigns for any and all injuries suffered by myself or dependents at any activity or trip sponsored by the City of North Port.

CITY: \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE: H: \_\_\_\_\_ W: \_\_\_\_\_ C: \_\_\_\_\_

FAX #: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

*Please mail or fax roster to the attention of the Recreation Coordinator.*