## \*\*\*\*All areas must be filled out completely & printed legibly\*\*\*\*

8.



ADDET ATHLETICS ROSTER									
COMPLEX: Foothills Sports	SPORT: Softball Baskett Arena   Schaefer Athletic Complex   Clement	,		occer on Center   F	Flag Football Ridge Recreation Center 1 Fa	aston Regional Pa	rk		
·									
TEAM NAME LEAGUE NIGHT SEASON/YEAR   I hereby state that all the players listed below have been informed of the Foothills League Rules and the Code of Conduct and have agreed to participate according to league rules and regulations. I understand that the sport of choice may have an element of danger and I take full responsibility for my actions and physical condition. My team and I understand that Foothills Park & Recreation District is in compliance with the Jake Snakenberg Youth Concussion Act, which requires a youth player (ages 19 and younger) to be removed from play if a concussion is suspected and can only return to play with medical authorization. My team and I hereby release and agree to indemnify and hold harmless the Foothills Park & Recreation District and its representatives and agents from all claims or liability for damages and/or injuries incurred by me in connection with any District event or activity. By signing this form, I will adhere to and follow all Foothills Park & Recreation rules, regulations, and the Code of Conduct.   Team Manager's Signature Date									
NAME	ADDRESS	DAY TIME	AGE	DOB	SIGNATURE	FHPRD ID#	<u>SHIRT</u>		
(Please Print Legibly)	(Street, City & Zip)	PHONE				(FSA Only)	<u>SIZE</u>		
1.									
2.									
3.									
4.									
5.									
6.									
7.									

9. 10. 11. 12.

Clement Park: FAX Roster to 303-409-2630 or E-Mail Roster to: breich@fhprd.org **REV DATE: 1-2-15** Foothills Sports Arena: Fax Roster to 303-409-2440 or E-Mail Roster to: brandonb@fhprd.org



\*\*\*\* All areas must be filled out completely \*\*\*\*



ADULT ATHLETICS ROSTER

	SPORT:	Softball	Basketball	Volleyball	Soccer	Flag Football	
COMPLEX: Foothills Sports A	rena   Schaefer	Athletic Complex	Clement Park	Lilley Gulch Re	ecreation Center	Ridge Recreation Center	Easton Regional Park

NAME	ADDRESS	DAY TIME	AGE	DOB	SIGNATURE	FHPRD ID#	<u>SHIRT</u>
(Please Print Legibly)	(Street, City & Zip)	PHONE				(FSA Only)	<u>SIZE</u>
13.							
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21.							
22.							
23.							
24.							
25.							

Clement Park: FAX Roster to 303-409-2630 or E-Mail Roster to: <u>breich@fhprd.org</u> Foothills Sports Arena: Fax Roster to 303-409-2440 or E-Mail Roster to: <u>brandonb@fhprd.org</u>