

**2016 30<sup>th</sup> Annual Casper Summer Showdown**  
**OFFICIAL TEAM ROSTER**  
*(Must be given to the Tournament Director before the 1st game played)*

**Liability Release Form**

I agree to abide by the established rules of the facility or program. I understand that the City of Casper does not carry accident insurance for participants in recreation programs. I also agree to release the City of Casper, its Council, Manager, officers, employees, agents, subcontractors, the Casper Recreational Leagues Association, and the Community Recreation Foundation from any and all liability, responsibility, claims, demands, actions, or causes of action whatsoever arising out of my injury or death, or damage or loss of property while upon any City of Casper premises or while participating in any activities. The terms of this release and Indemnification are contractual and not a mere recital. The undersigned acknowledges by execution of this Release and Indemnification that he/she understands these provisions and freely and voluntarily enters into them.

By Signing and submitting this Liability Release Form, I understand that I am a legally rostered player for the team listed. If it is discovered that I played illegally for a different team, I will be suspended for 2 games and must pay \$25 to be eligible once the suspension ends. I also understand that games played using an illegal player will be forfeited.

TEAM NAME: \_\_\_\_\_ CELL PHONE & CELL PROVIDER \_\_\_\_\_

MANAGER: \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

PLAYER'S NAMES-PRINT

PLAYER'S SIGNATURES

1. \_\_\_\_\_
2. \_\_\_\_\_
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MANAGER'S SIGNATURE