

2015-16 Hendersonville Parks
 Grades 3rd to 8th - Open Team Basketball - Official Roster Form

TEAM: _____ DIVISION: _____ BOYS/GIRLS: _____

COACH: _____ ADDRESS: _____

PHONE: (HOME) _____ (WORK) _____ (CELL) _____

EMAIL: _____

By signing the roster below, each parent/player hereby waive all claims against the City of Hendersonville, the Parks Department, and any other personnel involved in any injury or accident while participating in this program. I also grant permission to managing personnel or other representatives to authorize and obtain medical care should the player become ill or injured when neither parent or guardian is available to grant authorization for emergency treatment. I also certify that all information on this form is true and that misrepresentation could result in suspension from the program.

Print Player's Name	Address/City/State/Zip	School Attending	Grade	Parent/Guardian Signature (if under 18)
1				
2				
3				
4				
5				
6				
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8				
9				
10				
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12				