		The Edge Sports Center Official Team Roster and Waiver Form				
Team Name: Divisio		Division/Day:		Sport:		
Team Coach/Contact:		Phone Number:		Email:		
ddress:						
Number		Date of Birth	Address	Phone #	Email	Derent/Cuerdian Simplure
Number	Player Name	Date of Birth	Address	Phone #	Emaii	Parent/Guardian Signature
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I, the applicant/ we, the parents of the above applicant hereby assume all risk and hazards incidental to participation in any and all league/tournament/clinic/rental activities during the current season, including transportation to and from activities and I/we hereby waive, release, absolve, indemnify and agree to hold harmless the organizers, sponsors, supervisors, participants, corporation owners of the premises and persons transporting myself/our child to and from activities for any claim arising out of injury to myself/our child. I/we also agree to be responsible for the return of any facility owned shirts or equipment.