TEAM ROSTER/GENERAL RELEASE OF LIABILITY

ALL PLAYERS PLEASE READ BEFORE SIGNING

- 1. I hereby recognize and acknowledge that participation in recreational activities may involve bodily injury or emotional injury to myself and others. In consideration of being permitted to participate in Salt Lake County Parks & Recreation sponsored recreational activities, I hereby assume the risk of such bodily and/or emotional injury and hereby release, waive and discharge Salt Lake County, its officers and employees, from all liability of claims therefore resulting from my participation in any Parks & Recreation activities.
- 2. I authorize Salt Lake County Parks & Recreation staff to act on my behalf in accordance with their best judgments in the case of an emergency and agree to assume full responsibility for all medical expenses that may arise therefrom.
- 3. I hereby expressly agree that this release, waiver, and indemnity agreement, is intended to be as broad and as inclusive as permitted by the laws of the State at Utah, and that if any portion here from is found to be invalid, it is agreed that the balance shall not withstanding continue in full force and effect.

-	_				
	Геа	m	NI	1	m
	ıca		14	a	

Team Manager Name (Print): Phone Number:

Address , City, Zip:

The following players Parents have verified to me, as the team manager, that any participant under 18 years of age's legal guardian is required to sign the release below so they may participate in the program. I further understand that the release forms are available from Salt Lake County Parks & Recreation staff and must be submitted to Parks & Recreation prior to allowing any person under age 18 to play. I as manager accept reasonability for the payment of the registration fees for the team listed on this form, and agree to pay Salt Lake County are assonable attorney fee, in addition to the registration fee, in the event my count is referred to the County Attorney Office for collection. Account 30 days past due may be turned over to the Salt Lake County Attorney for collection.

Rosters will be illegal unless information is complete.

Team Manager Signature: E-mail Address:

Date Added	Date Dropped	Players Name	Players Signature	Address	City	Zip	Phone #
		1					
		2					
		3					
		4					
		5					
		6					
		7					
		8					
		9					
		10					
		11					
		12					
		13					
		14					
		15					
		16					
		17					
		18					
		19					
		20					

SALT LAKE COUNTY SPORTS OFFICE

5201 South Murray Park Lane Murray UT 84107 385-468-1670 Individual Players-Release of Liability-Assumption of Risk-Authorization for Medical Care

