

Adult Baseball League: Roster + Participant Release Form

Team Name Season S	Summer 2024	Date
--------------------	-------------	------

I hereby contract to fully abide by the policies, rules and regulations established by Hood River Valley Parks and Recreation District. Infraction of those rules can result in dismissal from the program of the individuals involved, and possibly dismissal of the team.

I agree, that in consideration of the services rendered and to be rendered by the Hood River Valley Parks and Recreation District, the organizers, sponsors, and supervisors, that I assume all risks and hazards incidental to the conduct of this activity including but not limited to the risk of personal injury attendant therewith. I hereby release, absolve, indemnify, and hold harmless the Hood River Valley Parks and Recreation District, the organizers, sponsors, and supervisors, any and all of them. In the event of personal injury, I waive all claims to damage against the above-mentioned parties. I understand that there is no insurance coverage provided for this activity and further understand that the acquisition of insurance coverage is my personal responsibility.

INSTRUCTIONS: PRINT OR TYPE / List all players / Fill out completely and accurately

ROSTERS: Turn in your roster by email to Gio@hoodriverparksandrec.org or bring to the Team Manager Meeting (Mon, July 15)

PARTICPATION FEE: \$ 750/Team if you pay on-line or \$850 if you pay in-person

LEAGUE OVERVIEW Ages: 18 + / Game Days: Sundays, Aug 4-Sept 22 + Playoff Tourney / Location: HRCSD fields / Game times: TBA

# of Players	Print Name	Signature	Mailing Address	Phone #	Email address
1					
2					
3					
4					
5					
6					
7					
More Ros	More Roster Spaces Next Page				

8			
9			
11			
12			
13			
14			
15			

Manager/Captain name	
Contact Phone	
Email	