



City of Seal Beach Recreation & Community Services

211 8th St Seal Beach CA 90740 Phone: (562) 431-2527 Ext. 1307

Email: communityservices@sealbeachca.gov



TEAM APPLICATION, ROSTER AND RELEASE OF LIABILITY

TEAM NAME: _____

SEASON: _____ Spring _____ Summer _____ Fall

LEAGUE: _____ Basketball _____ Softball _____ Men's _____ Coed

SKILL LEVEL: _____ Novice _____ Intermediate _____ Intermediate plus _____ Advanced

IS THIS A RETURNING TEAM? _____ No _____ Yes **TEAM NAME:** _____

WEEKDAY TIME PREFERNCE: _____ 6:30-7:35pm _____ 7:40-8:45pm _____ 8:45-10:00pm _____ Any

SCHEDULE REQUEST(S): _____
(An effort will be made to accommodate your request, however, requests are not guaranteed)

MANAGER'S INFORMATION

PARTICIPANTS NAME(S): _____

ADDRESS _____

CITY _____ **STATE/ZIP** _____

PRIMARY PHONE _____ **SECONDARY PHONE** _____

PRIMARY EMAIL: _____ **BIRTHDAY:** _____

SELECT METHOD OF PAYMENT

Cash Credit Card Check #: _____ (Payable to: City of Seal Beach)

Basketball (\$375-Mondays) Men's Softball (\$425-Tuesdays) Coed Softball (\$425-Thursdays)

RELEASE OF ALL CLAIMS AND LIABILITY

In consideration of the acceptance of my application for entry in the recreational event described on this application form, I hereby waive, release and discharge any and all claims for damages, for death, for personal injury or property damage which I may have or which may hereinafter inure to me, my heirs, or my beneficiaries, as a result of my participation in said recreational event. This release is intended to discharge, in advance, promoters, sponsors, officials and any and all involved municipalities and/or municipality employees or other public entities and their employees (and their respective agents and employees), from and against any and all liability arising out of or connected in any way with my participation in said recreational event, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above.

I further understand that serious accidents occasionally occur during the recreational event, which I am going to participate in; and those participants in this recreational event occasionally sustain mortal or serious personal injury; and/or property damage, as a consequence thereof. Knowing the risks of the recreational event that I am enrolling in, nevertheless, I hereby agree to assume those risks and to release and hold harmless all of the persons or entities mentioned above who (through negligence or carelessness), might otherwise be liable to me (or my heirs, beneficiaries or assigns) for damages. It is further understood and agreed that this waiver, release and assumption of risk, is to be binding on my heirs, beneficiaries and assigns. I agree to accept and abide by the rules and regulations, which control and are in effect for participation in the recreational event in which I am enrolling. Further, the property on which this recreational event is to be conducted may not be in a safe condition. It is understood and agreed that by engaging and participating in the recreational event, I am hereby waiving any and all right to claim any damages or injuries which may occur to me as a result of the unsafe condition of that property. I further understand and acknowledge that I am fully, and willingly giving up any claim



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against or right to sue, the City of Seal Beach, the School District, or their employees, agents or assignees for any injury that I may suffer, even if the injury was caused in whole or in part by the negligence of the City, the School District or its employees, agents or representatives or by the dangerous conditions of any property on which the recreational activity is being conducted. I am fully aware that participating in the recreational event in which I am enrolling is a dangerous activity and I voluntarily participate in said activity with the knowledge of the danger involved and hereby agree to accept any and all risk of injury. I have fully read this form and fully understand the contents thereof and hereby freely and willingly apply my signature below as my agreement to this release of liability form.

As Manager of the Team, I verify that all players have read the Release of Liability Form, legally initialed and signed the form and that each signature is in fact the signature of the player. Only those individuals whose names and signatures appear on the form will be permitted to participate. I represent that I am signing as an individual and as the agent of the sponsor.

First name	Last Name	Address	City/Zip	Phone
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10				
11.				
12.				
13.				
14.				
15.				
16.				

Player's Initials

1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.
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MANAGER'S PRINTED NAME

MANAGER'S SIGNATURE

DATE