BIG FOOT RECREATION DISTRICT ADULT PROGRAM PLAYER ADD & DELETE FORM

ATTENTION TEAM MANAGERS: Players may be added or deleted from your roster through 4:00 p.m. prior to the start of the THIRD game. All roster changes must be done on this form in person at the Recreation Office. Added players must sign the Waiver and Release of All Claims form on reverse side and a signature(s) must be obtained before this form is accepted. **Roster changes WILL NOT be done at the site of the game.**

INJURY SUBSTITUTIONS: Teams may replace injured players after the fourth scheduled game and prior to the beginning of any post-season tournament. Team managers are required to request the injured player substitution IN WRITING and must produce a written form from a physician regarding the player's injury. The League Supervisor will notify teams regarding the acceptance or denial of the substitution request.

| | NAME | PLAYERS TO ADDRESS | O BE ADDED PHONE | <u>R</u> | <u>NR</u> | |
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| | <u>NAME</u> | | O BE REMOVED PHONE | <u>R</u> | <u>NR</u> | |
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| | • | pove player information is and/or team ejection from | | player i | nformation is ground | ls |
| | Manager's | Signature Required | | Tear | n Name | |

RECREATION DISTRICT LEAGUE WAIVER & RELEASE OF ALL CLAIMS

Please read this form carefully and be aware that in registering for and participating in **the**16" Softball League you will be waiving and releasing all claims for injuries you might sustain arising out of playing softball in this league.

As a participant in this program, I recognize and acknowledge that there are certain risks of physical injury. I agree to assume the full risk of any injuries, including death, damages or loss which I may sustain as a result of participating in any and all activities connected with or associated with this program.

I agree to waive and relinquish all claims I may have as a result of participating in the program against the Big Foot Recreation District, its members of advisory committees, officers, agents, servants, volunteers, and employees. I do hereby fully release and discharge the Big Foot Recreation District, its members of advisory committees, officers, agents, servants, volunteers and employees from ANY and ALL CLAIMS from injuries, including death, damage or loss which I may have or which may accrue to me on account of me participating in this program. I further agree to indemnify and hold harmless and defend the Big Foot Recreation District, its members of advisory committees, officers, agents, servants, volunteers, and employees from any and all claims resulting from injuries, including death, damage, and loss sustained by me and arising out of, connected with, or in any way associated with the activities of this program.

I have read and fully understand the above Waiver and Release.

| | PRINT NAME | <u>SIGNATURE</u> | <u>DATE</u> |
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