CITY OF SANTA CRUZ PARKS AND RECREATION DEPARTMENT

ADULT RECREATION BASKETBALL

Addition/Supplemental Roster

TEAM NAME: _____ **MANAGER'S NAME:** _____

LEAGUE: ☐ **MEN'S** ☐ **WOMEN'S**

SEASON: ☐ **SPRING** ☐ **SUMMER** ☐ **FALL**

PLAYER NAME_____

ADDRESS (NO P.O. BOX)_____

CITY_____ZIP_____

PHONE_____EMAIL_____

CITY OF SANTA CRUZ

Release of Liability and Indemnification

I, the undersigned player, acknowledge, agree and understand that:

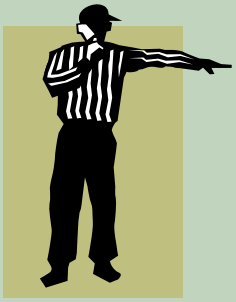
1. Voluntarily and of my own free will, I elect to participate as a member of the basketball team indicated below and in consideration for the City of Santa Cruz's agreement to allow my participation, I voluntarily elect to accept and abide by City Parks and Rec basketball league rules and the SANCRA Code of Conduct.
2. I understand that the very nature of the game of basketball is hazardous and risky, including, but not limited to, the acts of shooting, throwing the ball, jumping, running, stretching, sliding, diving, and collisions with other players and with stationary objects, all of which can cause serious injury or death to me and to other players.
3. I voluntarily elect to accept and assume all risks of injury incurred or suffered by me (a) while practicing or playing as a member of the team so designated, (b) while serving in a non-playing capacity as a team member during practice or play by other teams or by other players on my team, and (c) upon the premises of any and all of the venues arranged for by my team or league for practice or play.

In consideration of participation on this team, I on behalf of myself, hereby agree to release, hold harmless, indemnify and defend the City of Santa Cruz, its agents, employees, and volunteers from any and all claims or liability (including attorneys' fees and defense costs) for bodily injury or property damage arising from my negligence or willful misconduct relating to my participation in the above program. My duty to release, hold harmless, indemnify and defend the City of Santa Cruz shall not apply only when (1) the injury to person or property arises wholly from the negligence or willful misconduct of the City or its agents or employees or volunteers and (2) I have contributed in no part to the bodily injury or property damage. I hereby give the City of Santa Cruz Parks and Recreation Department the right to use photographs taken of me while participating in the above activity for reproduction in any medium for purposes of advertising, trade, display, exhibition, or editorial use.

Signature_____Date_____

I ACKNOWLEDGE THAT I HAVE READ AND THAT I UNDERSTAND EACH AND EVERY ONE OF THE ABOVE PROVISIONS IN THIS WAIVER, RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT AND AGREE TO ABIDE BY THEM.

RESIDENCY/PAYMENT INFORMATION



Are you a city resident? Yes ○ No ○

Have you included your proof of residency with this form? Yes ○ No ○

Residency proof may include a copy of your drivers license, recent utility bill, etc.

If the answer to either question is **"No,"** a $20 non-resident fee must be paid.

Pay by cash:
Visit the Parks and Rec office at 323 Church St., SC 95060.

Pay by check:
Visit the office or mail a check (payable to City of Santa Cruz) along with this completed form.

Pay by credit card:
Visit the office or mail/fax (420-5271) this completed form.

Name on card_____

Visa/MC #_____

Expiration Date_____