CITY OF SANTA CRUZ PARKS AND RECREATION DEPARTMENT

SPRING BASKETBALL LEAGUE 2013

323 CHURCH STREET, SANTA CRUZ, CA (831) 420-5270/420-5271 (Fax)

TEAM NAME:_____ **MEN'S** ☐ **WOMEN'S** ☐

MANAGER: _____ **HM. PHONE:**_____ **CL. PHONE:** _____

ADDRESS:_____

CITY: _____ **ZIP:** _____

Note: All information must be clearly legible, accurate, and verifiable. ***Players: Complete both sides***

PLAYER NAME (print)	STREET ADDRESS*	CITY	ZIP	HOME PHONE	Office Use NR Fee? $20 or ✓
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BASKETBALL HAS A 12 PLAYER MAXIMUM.

Current Proof of residency required; copy of driver's license, utility bill or bank account deposit slip.
City boundaries are approximately Natural Bridges State Beach to the Santa Cruz Yacht Harbor.

PO Box is not a valid proof of residency

All information provided on the front and back of this form is valid and verifiable. **Complete both sides.**

MANAGER'S SIGNATURE: _____ **DATE:** _____

Office Use Only:

Previous league:_____ Priority:____ League fee: $_____

Previous season/record:_____ Non-res fee: $20 x ___: $_____

Note:_____ Total due at registration: $_____

BASKETBALL - Player Waiver, Release of Liability and Indemnification Agreement

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.

_____	City of Santa Cruz
Name of Team	Field Owner of Other Entity

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.

NAME (print)	SIGNATURE	DATE	EMAIL ADDRESS
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MANAGER'S SIGNATURE: _____ **DATE:** _____