



**City of Victorville Community Services Department
RECREATION DIVISION**
 14973 Joshua Street ♦ Victorville, Ca. 92394 ♦ 760.245.5551
 Se habla Espanol por favor llame al numero 760.245.5551

ADULT SPORTS ROSTER • PLAYER ADDITION/DELETION

Team Name: _____ Manager's Name: _____ League: _____

DELETIONS

Request the following player(s) be deleted from my team as of _____
 (Date)

1. _____ 3. _____
 2. _____ 4. _____

ADDITIONS

****REMINDER: A team's roster may not exceed 16 players****

Request the following player(s) be added to my team as of _____
 (Date)

| PRINT NAME | SIGNATURE | ADDRESS | CITY | ZIP | PHONE |
|------------|-----------|---------|------|-----|-------|
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I, the above signed, understand the following:
 * I am aware that recreational activities can be hazardous and I am voluntarily participating in these activities with knowledge of the hazards involved and hereby agree to accept any and all risks of injury or death. * The City is not responsible for participants' injuries or damages occurring from "hazardous recreation activities" (CA Government Code 831.7). * The City does not provide participants with medical insurance or treatment for injuries. * I agree to hold harmless and release the City of Victorville, it's officers, agents and employees from any and all liability arising from or related to my participation in City of Victorville program activities. This release includes, but is not limited to, all liability for death, personal injury or property damage resulting from the active or passive negligence of the City of Victorville or its agents or any defective or hazardous condition of any facilities while using said equipment articles and/or facilities.

NOTE: This form must be turned into the Recreation Office, Recreation Staff, or official with the signature of the new player(s) before any new player can participate.