



**City of Star**

# ADULT TEAM REGISTRATION

P.O. Box 130

## FORM

Sport: \_\_\_\_\_

Star, ID 83669

286-7247 Fax: 286-7569

**SIGNATURE ON ROSTER INDICATES THAT PLAYER HAS READ AND UNDERSTOOD THE CITY RELEASE FORM.** Signature must be on Roster prior to participating in the event. Release form must be attached to/or printed on the back of this roster. \$25.00 Star Resident \$40.00 non-resident.

TEAM NAME: \_\_\_\_\_ MANAGER'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: (H) \_\_\_\_\_ (C) \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

PLAYERS NAME (Please Print)	PLAYERS SIGNATURE	CITY / ZIP CODE	EMAIL ADDRESS	PHONE NUMBER	STAR		FEES	
					RESIDENT?		PAID	
1					YES	NO	\$25	\$40
2					YES	NO	\$25	\$40
3					YES	NO	\$25	\$40
4					YES	NO	\$25	\$40
5					YES	NO	\$25	\$40
6					YES	NO	\$25	\$40
7					YES	NO	\$25	\$40
8					YES	NO	\$25	\$40
9					YES	NO	\$25	\$40
10					YES	NO	\$25	\$40
11					YES	NO	\$25	\$40
12					YES	NO	\$25	\$40
13					YES	NO	\$25	\$40
14					YES	NO	\$25	\$40

**(PLEASE LIST ADDITIONAL PLAYERS ON SECOND ROSTER IS NECESSARY)**

## RELEASE

I, as the participant and/or parent/legal guardian of the minor child listed, and in consideration for allowing myself or my minor child to participate in the city's recreation programs, and activities noted, hereby acknowledge and agree as follows on behalf of myself and my child:

1. I have requested that I or my minor child be allowed to participate in the city's recreation program(s) and activities recognizing that such participation involves, or may involve, risks, both known and unknown, of physical injury or illness.

2. By signing this release, I, on behalf of myself and my minor child, expressly assume all risks, known and unknown, of injury, illness and property damage to myself, my minor child, or to any third party arising from or related to my or my child's participation in the city's recreation program(s). I understand that the registered activities and services may have an element of hazard or inherent danger and I take full responsibility for me or my child's actions and physical condition.

3. By signing this release, I, on behalf of myself and my minor child, expressly exempt, waive, release and discharge in advance the city, its employees, officers and agents, from any and all claims, liabilities, actions, or damages for injury, illness or loss that may arise from my or my child's participation in the city's recreation program(s) and activities. I further agree to hold harmless and indemnify the city, its employees, officers and agents, from any and all injuries, damage, loss claims or demands including but not limited to attorney's fees, medical, and ambulance costs which arise from or are related to me or my child's participation in the city's recreation program(s) and activities.

4. I understand that this agreement incorporates the entire understanding and agreement between myself, my minor child, and the City of Star, its officers, employees, agents and representatives, and that it cannot be modified or changed in any way by the statements, promises or representations of any employee or agent of the city; and that this agreement is intended to be as broad and inclusive as permitted by the laws of Idaho, and that if any portion is held invalid or unenforceable, the remaining portions shall continue in full legal force and effect.

5. By executing this agreement I also do hereby authorize the city, its employees, officers and agents, to seek medical assistance for myself or my minor child in the event of injury or illness occurring to me or my child while participating in any city recreational program or activity. I also understand that the city, its employees, officers and agents will not be responsible for administering any medications.

6. I understand that no health, and/or accident insurance is provided for these activities and I, the undersigned parent or guardian or the participant, accept full responsibility for obtaining the same or for payment of all expenses in the absence of such insurance.

7. I give my consent to use any photographs or videotape taken of me or my child in future promotional or marketing materials at no cost.

8. My signature below indicates that I have read this document in its entirety, that I understand it completely, and that it affects my legal rights and the legal rights of my child, and that I, along with all heirs, assigns and personal representatives for myself and my child, agree to be bound by its terms. I also acknowledge that I am providing this waiver and release in advance for the benefit of the city knowing that all possible risks or causes of injury can neither be foreseen nor eliminated.