The Edge Sports Center Official Team Roster and Waiver Form

Team Name: | Division/Day: | Sport:

Team Coach/Contact: | Phone Number: | Email:

Address:

Number	Player Name	Date of Birth	Address	Phone #	Email	Parent/Guardian Signature

I, the applicant/ we, the parents of the above applicant hereby assume all risk and hazards incidental to participation in any and all league/tournament/clinic/rental activities during the current season, including transportation to and from activities and I/we hereby waive, release, absolve, indemnify and agree to hold harmless the organizers, sponsors, supervisors, participants, corporation owners of the premises and persons transporting myself/our child to and from activities for any claim arising out of injury to myself/our child. I/we also agree to be responsible for the return of any facility owned shirts or equipment.