

Adult Team Roster and Release Form - 2020

Rosters and Fees Due at Captain's Meeting. Late Entries shall pay an additional \$100 per team effective 2/1/2015.

Activity: Check One	Fees Per Team:	Reg. Deadline:	Program Timeline:
___ Co-ed Softball	\$400	May 20 – Capt. Mtg. 7:30 pm	Mondays - June-July (9 weeks)
___ Co-ed Volleyball	\$275	Sep. 2 – Capt. Mtg. 5:00 pm	Wednesdays– Sep-Nov (9 weeks)
___ Womens Volleyball	\$275	Dec. 16 – Capt. Mtg. 5:00 pm	Weds/Thurs - Jan-Mar (9 weeks)
___ Mens Basketball	\$400	Dec. 16 – Capt. Mtg. 5:30 pm	Weds – Jan - Mar (9 weeks)

Recreational Team ___ Competitive Team ___ Game Night Preference: _____

Team Name: _____ Captain's Name: _____

Captain's Address City/State Zip

Captain's Phone Captain's Cell Phone Captain's Email

TEAM ROSTER

Player Name: Phone: Date Added to Roster: T-shirt Size:

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By Signing the roster, I hereby release and discharge the Bowman park Board and all employees and volunteers from any liability whatever in any manner arising out of injury or damage that may be sustained by the participant due to his/her participation in these programs. I assume all responsibility of risks involved in participation in these programs.

~ DO NOT WRITE BELOW – Bowman Parks and Recreation USE ONLY ~

Fee Paid: \$ _____ Cash ___ Check #: _____ Date: _____ Entered Date: _____
Staff Initials: _____