Adult Softball League - Team Roster

All players must complete information and sign prior to participation. TEAM NAME: _____

PARTICIPATION AGREEMENT

I do hereby release the City of Aurora, its employees and coaches, in their official and individual capacities from any and all claims, liability or demands for any personal injury, sickness or death as well as property damage expenses of any nature whatsoever which may be sustained or incurred by said participant in conjunction with participation. Furthermore, I (on behalf of the participant) hereby assume all risk of personal injury, sickness, death, damage and expenses as a result of the participation in the sport.

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