

CITY OF ROSEVILLE DEPARTMENT OF PARKS, RECREATION & LIBRARIES PARTICIPANT'S REGISTRATION - WAIVER, RELEASE, ASSUMPTION OF RISK ANDINDEMNITY AGREEMENT

NOTE: Participant(s) or legal guardian must complete waiver form in its entirety prior to the first class meeting. The City of Roseville Parks, Recreation, & Libraries Department staff reserves the right to photograph facilities, activities and program participants for potential future use. All photos will remain the property of the City of Roseville. In consideration of the permission by the City of Roseville (CITY) to accept the above named participant(s) in the activity(ies) listed above given, taught or sponsored by the CITY, the undersigned hereby releases the CITY from, and waives and relinquishes any claim, liability, cause of action, damages, or costs for personal injury or property damage arising as a result of participation in or receiving instructions from the CITY regarding said activity, excepting for such personal injury or property damage as may arise directly out of the active negligence of the CITY, its officers, agents or employees. The undersigned acknowledges that he/she has been fully advised of the risks and potential dangers incidental to engaging in the activity for which this registration is submitted, and voluntarily and knowingly assumes the risks of engaging in the activity.

NOTE: By signing this agreement, you are agreeing to release photo rights and relieve the City of liability for personal injury, wrongful death or property damage except as may be caused by the active negligence of the CITY. A written cancellation request must be presented at the Parks & Recreation Department office prior to the second class meeting. Refunds will be processed within two weeks.

Team Name			
Main Contact #	E-Mail		
Division			
Participant Name			
Signature of Participant (if under 18, Parent or Guardian)			Date
Participant Name	DOB	Main Contact #	
Signature of Participant (if under 18, Parent or Guardian)			Date
Participant Name	DOB	Main Contact #	
Signature of Participant (if under 18, Parent or Guardian)			Date
Participant Name	DOB	Main Contact #	
Signature of Participant (if under 18, Parent or Guardian)			Date
5. Participant Name	DOB	Main Contact #	
Signature of Participant (if under 18, Parent or Guardian)			Date
6. Participant Name	DOB	Main Contact #	
Signature of Participant (if under 18, Parent or Guardian)			Date
7. Participant Name	DOB	Main Contact #	
Signature of Participant (if under 18, Parent or Guardian)			Date
Participant Name	DOB	Main Contact #	
Signature of Participant (if under 18, Parent or Guardian)			Date

9. Participant Name	DOB	Main Contact #	
Signature of Participant (if under 18, Parent or Guardian)			Date
10. Participant Name	DOB	Main Contact #	
Signature of Participant (if under 18, Parent or Guardian)			Date
11. Participant Name	DOB	Main Contact #	
Signature of Participant (if under 18, Parent or Guardian)			Date
12. Participant Name	DOB	Main Contact #	
Signature of Participant (if under 18, Parent or Guardian)			Date
13. Participant Name	DOB	Main Contact #	
Signature of Participant (if under 18, Parent or Guardian)			Date
14. Participant Name	DOB	Main Contact #	
Signature of Participant (if under 18, Parent or Guardian)			Date
15. Participant Name	DOB	Main Contact #	
Signature of Participant (if under 18, Parent or Guardian)			Date
16. Participant Name	DOB	Main Contact #	
Signature of Participant (if under 18, Parent or Guardian)			Date