2016-2017 PLAYER CONTRACT

Team Name:_____

Sport:_____Division:_____

Player Full Name:_____DOB:_____

Mailing Address:_____City:_____ Zip:_____

Home Phone:_____Work Phone:_____

Cell phone:_____Email:_____

I agree to play for the above team in accordance with the rules and regulations of the City of Seward recreational league. I certify that I am eligible to play under current league regulations. I agree to pay the established registration fee upon signing this agreement as a condition of participation.

I understand and accept the element of risk of physical injury through participation in this sport. I further understand there is no medical insurance provided by the City of Seward for this sports program. I am aware that I shall be responsible for any and all medical costs which may arise from injury through participation in the program. I hereby consent to emergency medical treatment necessary for the immediate welfare of myself by a qualified physician or nurse, and/or hospital, in the event of injury or illness during all periods of time in which the participant is a member of the Parks & Recreation group, and hereby waive on behalf of myself and the City of Seward, any of its agents, or employees, any liability, arising out of such medical treatment. I consent to the use of my likeness and/or name by the City of Seward for the purpose of promoting the City's programs and activities.

I hereby release the City of Seward, the Seward Parks & Recreation Department, their agents, employees and volunteers from any and all liability arising from any injuries sustained, directly or indirectly from participation in this program.

Player's Signature*:_____Date:_____

**If player is under 18 years, the contract must be signed by parent/guardian*

Manager's Signature:_____Date:_____

SPRD Officer Use:
Player Fee Paid: Amt $_____Receipt #_____Ck #_____Staff Initials_____

PLAYER RELEASE
(To be completed only if Player is resigning or being dropped from team roster)

I, manager of the _____ team, here by release _____ to play for _____ team.

PLEASE NOTE, Players must wait 48 hours after signing to join a new team or the new team will forfeit.

Manager Signature:_____ Date:_____