SHELBYVILLE PARKS & RECREATION
BASKETBALL REGISTRATION/ROSTER FORM

Each team's coach is responsible for ensuring that this roster is completed so it is legible, read and signed by each player. All players are responsible for being knowledgeable of and aware of the rules as established by the Parks and Recreation Department.

Team Name_____League_____

Coach_____Address_____City/Zip_____

Email Address_____Contact Phone #_____

Participant Agreement: I understand the dangers associated with participating in this program or any other physical fitness or recreation program. I am in good physical health and will abide by the rules, regulations, guidelines, and instructions as determined by the Shelbyville Parks and Recreation Department board, directors, instructors, and/or employees.
Hold Harmless Agreement: I do hereby release and hold harmless the City of Shelbyville, Shelbyville Parks Department and any sponsors or associations related to any program or activity, and/or employees liable or responsible for any injuries, claims, and/or damages occurring during my participation in any such sponsored event, programs or activities. This agreement to release and hold harmless shall also be for my heirs, estate, executor, administrator, assignees, and all members of my family.

Team Roster

Name	Address	City/Zip	Phone #	Signature

Shelbyville Parks & Recreation
945 S. Tompkins Street, Shelbyville, IN 46176 (317)392-5128 Fax (317)392-5144
www.shelbyparks.com