# *Clark County Parks and Recreation*

## OFFICIAL SOFTBALL ROSTER FORM

**For Office Use Only**

**Initials:** _____

**Date Rec'd:**

___ / ___/ ___

**Date:** _____

**Team Name:** _____

**Season** _____

**Year** _____

**League:** Men's Co-ed

**Week Day:** Monday Tuesday Wednesday Thursday Friday Saturday

**Division:** "Nov" Div "D" Div "D1" Div "D2" Div "D+" Div "C" Div

**Site:** Sunset 5 & 6 Sunset 11 & 12 Sunset 13 & 14 Desert Bloom 1 & 2 Desert Breeze

***LIABILITY WAIVER***

**I expressly understand and agree** that neither the Clark County Department of Parks & Recreation; Las Vegas, Nevada; a municipal corporation, nor any of its officers, agents, volunteers, assistants or employees shall be held responsible or made the subject of any claim seeking to assess damage or liability for or arising from personal injury or property damage or loss of any other sort to myself actual or proposed participation in the above named program, and I hereby agree to indemnify and hold the Clark County Department of Parks & Recreation, its officers, agents, volunteers, assistants, or employees harmless on account of any such claim.
(Please provide "complete" information below, without player's identification & signature roster will not be accepted.) I have read and fully understand the above statements:

| No. | Name of Player (print or type) | | Signature | Phone No. |
|---|---|---|---|---|
| 1) | | | | |
| 2) | | | | |
| 3) | | | | |
| 4) | | | | |
| 5) | | | | |
| 6) | | | | |
| 7) | | | | |
| 8) | | | | |
| 9) | | | | |
| 10) | | | | |
| 11) | | | | |
| 12) | | | | |
| 13) | | | | |
| 14) | | | | |
| 15) | | | | |
| 16) | | | | |
| 17) | | | | |
| 18) | | | | |
| 19) | | | | |
| 20) | | | | |

| Manager or Coach: (Please print name) | Address: | Work #:<br>Home #: |
|---|---|---|
| **MANAGER'S OR COACH'S SIGNATURE:** | | |