

# Englewood Parks & Recreation Department

1155 W Oxford Ave  
 Englewood CO 80110  
 303 762.2680 Fax 303 762.2688



## Adult Sports - Team Roster

Office Use Only

Amt Pd		Cash / Ck #	
Date		Initials	

The undersigned hereby assume the entire risk of personal injuries that may be incurred from participation in the league sponsored by the Englewood Parks & Recreation Department and release the Englewood Parks & Recreation Department and the City of Englewood or sponsors from and hereby waive all claims and demands arising from personal injuries that may be incurred by us. I agree not to attempt to hold the Englewood Parks & Recreation Department, City of Englewood, or sponsors therefore.

Manager \_\_\_\_\_ Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone / Fax \_\_\_\_\_

Asst Manger \_\_\_\_\_ Home Phone \_\_\_\_\_  
 Work Phone \_\_\_\_\_

Team Name \_\_\_\_\_ League \_\_\_\_\_ Sport \_\_\_\_\_

Resident ID #	Non Res Fee	Name	Signature	Phone #
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