Commerce Parks & Recreation Department
2015 Winter Adult Basketball Player Contract

(Last date to add a player is 1-16-2015 by 5pm)

Check League ☐ Men's Church League ☐ Men's Business League

Team Name _____

Player's Name _____ **Age** _____

City _____ **State** _____ **Zip** _____

Home Phone _____ **Cell Phone**_____**Work Phone** _____

Date of Birth _____ **Email Address** _____

Commerce City Resident? ☐ **Yes** ☐ **No**

I, the undersigned, hereby agree to save and hold harmless, Commerce City, the City Council and all employees or agents of Commerce, including all individuals who are affiliated with the programs administered by the Parks and Recreation Department of Commerce, as the result of personal or bodily injury or damages to me caused by negligence or other acts of any of the above named individuals or entities while participating in any activities administered by the Parks & Recreation Department of Commerce, or while coming to and going from those activities, and further release and agree to fully indemnify them from liability in the event that damages are awarded against any of the above rising out of injuries to me, my child, or my ward. I assume all risks and hazards incidental to the conduct of the activities.

I understand that health, or accident insurance, which would cover my medical, hospital, or related expenses in the event of injury in this activity, is my responsibility. I understand the Parks & Recreation Department of Commerce strongly recommends that if I do not have sufficient insurance to cover such incidents that I should take the necessary action to obtain it. I further understand that these programs are recreational and that if I should exhibit unsportsmanlike conduct, I may be removed from the program.

I understand that I am bound to abide by the Commerce Parks & Recreation Department's Code of Conduct.

I further understand that I may be photographed and such an image may be published in an outlet used to promote or publicize the program unless otherwise noted.

Player's Name Printed _____

Player Signature _____ **Date** _____

Parent or Guardian Signature _____ **Date** _____
(For players aged 16 & 17 years old) ***(must be 16 by Jan 1. 2015)***

Manager's Printed Name _____

Team Manager's Signature _____ **Date** _____

Church League Only:
We, the undersigned, do certify that the player named above is a letter holding member or active participant or invitee of the church sponsoring this team and is eligible to participate in the church league:

Minister/Pastor's Signature _____ **Date** _____