2014 WINTER TEAM INFORMATION

City of Goodyear Recreation Division

SOFTBALL TEAM ROSTER



3075 North Litchfield Road - Goodyear, Arizona 85395

Team Name:				Manager E-	mail:		
Manager:				Manager Da	ate of Birth:		Age:
Address:	-		ين أ اسم	City:	10000	Zip:	
Home ™:_		w	ork 🕾:		Cell 2	.	
Please write	e in the phone nu	mber that you want li	sted on the gan	ne schedule 🕾:			
Adult Softba	all Rosters due to	the Recreation Offic	e by 5:00 P.M.	on Friday - Dec	ember 13, 2013	for review by Recrea	tion Coordinator
LOTTERY	REGISTRATION	BEGINS: Saturday -	December 21,	2013 F	REGISTRATION I	ENDS: Friday - Janu	ary 3, 2014
Priority 1	RETURNING: LOTTERY: REGISTRATION: COST:	status as a returning t however your priority Rosters must be com Saturday - December	eam for the follow status fee will ren pleted and signed 21, 2013 (9:00 A 23, 2013 through	ving season honor nain the same unle I to qualify for Prio .M 9:45 A.M.)	ing you a spot in the ess your percentage rity 1 status - NO E.	e league on your alloca e of Goodyear residents	s changes in your favor.
Priority 2	RESIDENT: LOTTERY: REGISTRATION: COST:	sponsored team. Rosters must be compaturday - December	oleted and signed 21, 2013 (10:00	I to qualify for Prio A.M 10:45 A.M.)	rity 1 status - NO E.	nts and/or a Goodyear of the sand/or a Goodyear of the sand/or a Goodyear of the sand of t	
Priority 3	NON-RESIDENT: LOTTERY: REGISTRATION: COST:	scheduled game befo Saturday - December	re any player take 21, 2013 (11:00	es the field. A.M 11:45 A.M.)		equired to collect signat	
SOFTBALI	SEASON BEGI	NS THE WEEK OF:	Sunday - Janua	ary 13, 2014 Al	ND ENDS THE W	EEK OF: Sunday - I	March 23, 2014
Goodyear Pa 3075 North L Goodyear, A Mandatory m	REGISTRATION LOCATION Goodyear Parks & Recreation Department 3075 North Litchfield Road Goodyear, AZ 85395 Mandatory managers meeting will take place at the Goodyear Recreation Office; Thursday - January Next Softball season will begin Spring 2014. GAME SITE LOCATIONS Goodyear Community Park 3151 North Litchfield Road Goodyear, AZ 85395 Goodyear, AZ 85395 9, 2014 at 6:30 P.M.						
ADULT SOFTBALL PROGRAM Please check the box that applies: Priority 1 (Returning Team) Fall Season Priority 2 (Resident and/or Goodyear Business Sponsored Team) Spring Season Under Season What was your record last season? (Or current league to date): WINS LOSSES TIES FORFEITS							
□ Tuesday	Men's "D" Leaday Men's "D" Lead	OFTBALL LEAGUES ague (6:00 P.M 10:00 ague (6:00 P.M 10:00 ague (6:00 P.M 10:00	P.M.) DH	☐ Sunday A	dult Co-Rec Softba	PITCH SOFTBALL LE II League (6:00 P.M II League (6:00 P.M	10:00 P.M.) DH
Check #: Credit Card:	□ American Exp		Cash A Card □ Vis	mount: \$ a Roster taken EXP:	by:/_		Amount: \$
Team Priority	y: ☐ Priority 1 (R	teturning Team) D	riority 2 (Residen	t and/or Goodyea	Business Sponsore	ed Team)	3 (Non-Resident Team)

Manager's Waiver						
Rosters must be completely filled out with the player's name, address, city, state, zip, phone number's and signature from each parent and or legal guardian of each player. As the representative of my team, I have read and agree to all the rules and regulations of the City of Goodyear Parks and Recreation Department. I verify that to the best of my knowledge all information given on this form is true and accurate.						
Manager's Full Name (Print)	Manager's Signature	Date				
Participation Waiver						

I. (Participant's Name) recognize that participation in the above described event/activity involves vigorous physical exertion and that I may sufferer temporary or permanent serious physical injury, including but not limited to sprains, fractures, brain or spinal damage, paralysis or even death while participating in the event/activity. With full knowledge of the above-referenced risks, and in consideration for being permitted to voluntarily participate in the event/activity identified above, I HEREBY AGREE NOT TO SUE AND TO DEFEND, INDEMNIFY, AND FOREVER RELEASE AND HOLD HARMLESS the City of Goodyear, its officers, employees, agents, and volunteers, individually and collectively, while acting in their official capacity; of, from and against any and all liability, damage, claims, suits, payments, judgments, demands, expenses, attorney's fees, defense costs, and/or actions, of any kind or nature, including fault or negligence, related to, arising out of, or alleged to arise out of directly or indirectly my participation for any purpose in the event/activity. This indemnity, release and hold harmless provision shall apply regardless of the nature of the injury or harm alleged, whether for injury or death to persons or damage to property, and whether such claims are alleged as common law, statutory or constitutional claims or otherwise. This agreement shall apply whether the basis for claims, suit, demand, and/or action may be attributable in whole or in part to the City, its officials, employees, agents and volunteers, but does not extend to any such claim or liability that is caused by the sole and exclusive intentional acts or gross negligence of the City of Goodyear, its officers, employees, agents or volunteers. I understand and agree that this Indemnification, Release and Hold Harmless Agreement is intended to be as broad and inclusive as permitted by law. I acknowledge that I have read the foregoing and that I am aware of the legal consequences of this agreement. This agreement shall be legally binding on my personal representatives, heirs, assigns and next of kin. I further consent to the use of photographs. video tapes, films and recordings of me for advertising, newsletters, bulletin boards, broadcast, or other uses by the City of Goodyear. I certify that I am over 18 years of age and have read, fully understand and voluntarily agree to the terms and conditions of this indemnification, release and waiver of liability.

Indemnification, Release and hold harmless agreement; Consent to use of Image

#	Participant's Full Name (PRINT)	Participant's Signature	Date
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02			
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	Registrant / Player First & Last Name:	Home Address:	City:	State:	Zip:	
01.	Home/Cell Phone:	Work Phone:	Birth Date:	Age:	Male: Female:	
<u> </u>						
	Registrant / Player First & Last Name:	Home				
		Address:	City:	State:	Zip:	
02.	Home/Cell Phone:	Work Phone:	Birth Date:	Age:	Male: Female:	
	Registrant / Player First & Last Name:	Home Address:	City:	State:	Zip:	
03.	Home/Cell Phone:	Work Phone:	Birth Date:	Age:	Male: Female:	
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	Registrant / Player First & Last Name:	Home	Ī			
		Address:	City:	State:	Zip:	
04.	Home/Cell Phone:	Work Phone:	Birth Date:	Age:	Male: Female:	
	Registrant / Player First & Last Name:	Home Address:	City:	State:	Zip:	
05.	Home/Cell Phone:	Work Phone:	Birth Date:	Age:	Male: Female:	
	Registrant / Player First & Last Name:	Home Address:	City:	State:	Zip:	
0.0	Home/Cell	Work	Birth		Male:	
06.	Phone:	Phone:	Date:	Age:	Female:	
	Registrant / Player Home					
	Registrant / Player First & Last Name:	Address:	City:	State:	Zip:	
07.	Home/Cell Phone:	Work Phone:	Birth Date:	Age:	Male: Female:	
				J.		
	Registrant / Player First & Last Name:	Home Address:	City:	State:	Zip:	
08.	Home/Cell Phone:	Work Phone:	Birth Date:	Age:	Male: Female:	
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Г	Registrant / Player	Home			1	
	First & Last Name:	Address:	City:	State:	Zip:	
09.	Home/Cell Phone:	Work Phone:	Birth Date:	Age:	Male: Female:	
	Registrant / Player First & Last Name:	Home Address:	City:	State:	Zip:	
10.	Home/Cell Phone:	Work Phone:	Birth Date:	Age:	Male: Female:	
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	Registrant / Player First & Last Name:	Home Address:	City:	State:	Zip:	
11.	Home/Cell Phone:	Work Phone:	Birth Date:	Age:	Male: Female:	
	Registrant / Player First & Last Name:	Home Address:	City:	State:	Zip:	
12.	Home/Cell Phone:	Work Phone:	Birth Date:	Age:	Male: Female:	
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	Registrant / Player First & Last Name:	Home Address:	City:	State:	Zip:	
13.	Home/Cell Phone:	Work Phone:	Birth Date:	Age:	Male: Female:	
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	Registrant / Player	Home				
	Registrant / Player First & Last Name: Home/Cell	Address: Work	City:	State:	Zip:	
14.	Phone:	Phone:	Birth Date:	Age:	Female:	
	Registrant / Player First & Last Name:	Home Address:	City:	State:	Zip:	
15.	Home/Cell Phone:	Work Phone:	Birth Date:	Age:	Male: Female:	
	Registrant / Player First & Last Name:	Home Address:	City:	State:	Zip:	
16.	Home/Cell Phone:	Work Phone:	Birth Date:	Age:	Male: Female:	
	Registrant / Player First & Last Name:	Home Address:	City:	State:	Zip:	
17.	Home/Cell Phone:	Work Phone:	Birth Date:	Age:	Male: Female:	
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	Registrant / Player First & Last Name:	Home Address:	City:	State:	Zip:	
18.	Home/Cell Phone:	Work Phone:	Birth Date:	Age:	Male: Female:	
	Registrant / Player	Home				
	First & Last Name:	Address:	City:	State:	Zip:	
19.	Home/Cell Phone:	Work Phone:	Birth Date:	Age:	Male: Female:	
	Registrant / Player First & Last Name:	Home Address:	City:	State:	Zip:	
20.	Home/Cell Phone:	Work Phone:	Birth Date:	Age:	Male: Female:	
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