



# URBANA PARK DISTRICT Kickball Roster

**Team Name:** \_\_\_\_\_

**Manager's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**E-Mail:** \_\_\_\_\_

**Day Phone:** \_\_\_\_\_ **Evening Phone:** \_\_\_\_\_

We the undersigned, hereby acknowledge that each of us has read the Waiver and Release of all Claims Form on the reverse side and each of us, individually, hereby agrees to be bound by the terms of said waiver and release.

Each player must sign their own signature, and this signature is for both the roster and the Waiver and Release of all Claims Form.

	Name	Address	City/Zip	Phone	Signature
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

Each team needs a minimum of 4 males and 4 females each week.

Please submit completed roster with addresses and phone #s at Managers' Meeting.

Note: Players can be added to the roster during the season by filling out a roster addition form.

For questions, contact League Administrators:

Kyle Mills (217) 255-8601 or [kamills@urbanaparks.org](mailto:kamills@urbanaparks.org)

Greg Cales (217) 255-8602 or [tgcales@urbanaparks.org](mailto:tgcales@urbanaparks.org)



# URBANA PARK DISTRICT

## Adult Kickball Summer 2018

### Registration Form

Please Note: All mailings from the UPD will be mailed to the manager.

(Please print legibly)

Team Name: \_\_\_\_\_

Manager's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Assistant Manager's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Begins Thursday, May 31, 2018

EB Fee: \$120 per team plus \$10 for each non-resident – by Thursday, May 17

Regular Fee: \$144 per team plus \$10 for each non-resident – by Thursday, May 24

League Code: 6524

**Manager's Meeting: Thursday, May 24, 6:00pm, Brookens Gym**

Games are on Thursday evenings from 6:30-10:30PM at Prairie Fields and Canaday Park

#### Urbana Park District Waiver and Release of All Claims

I recognize and acknowledge that there are certain risks of physical injury to participants in the above program(s) and I agree to assume the full risk of any injuries, damages, or loss regardless of severity which I or my minor child/ward may sustain as a result of participating in any and all activities connected with or associated with such program(s). I agree to waive and relinquish all claims I or my minor child/ward may have as a result of participating in the program against the District and its officers, agents, servants, and employees.

I do hereby fully release and discharge the District and its officers, agents, servants, and employees from any and all claims from injuries, damage or loss which I or my minor child/ward may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with the activities of the program(s).

I further agree to indemnify and hold harmless and defend the District and its officers, agents, servants, and employees from any and all claims resulting from injuries, damages and losses sustained by me or my minor child/ward arising out of, connected with, or in any way associated with the activities of the program(s). In the event of an emergency, I authorize District officials to secure from any licensed hospital, physician, and/of medical personnel any treatment deemed necessary for me or any minor child/ward's immediate care and agree that I will be responsible for payment of all medical services rendered.

#### For office use only

Amount Paid: \$ \_\_\_\_\_

Cash Receipt # \_\_\_\_\_

Main Contact ID: \_\_\_\_\_

Check # \_\_\_\_\_ V M D A

Received by: \_\_\_\_\_

Date: \_\_\_\_\_

Entered by: \_\_\_\_\_

Date: \_\_\_\_\_