



FOR YOUTH DEVELOPMENT®  
 FOR HEALTHY LIVING  
 FOR SOCIAL RESPONSIBILITY

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

## GENEVA LAKES FAMILY YMCA | 2019 Adult Basketball League

### Roster Form with Waiver

In consideration of participating in this adult program, I agree to indemnify and hold harmless the Geneva Lakes Family YMCA, any of their officers, directors or staff from any liability of claim or action for damages from or in any way arising out of participation in this program by person(s) registered. In case of injury, accident or emergency, employees of the Geneva Lakes Family are hereby authorized to secure medical care deemed necessary as a result of accident or injury to the participant. I further agree to pay any and all cost incurred as a result of said treatment.

	Player Name (First and last)	Preferred Phone	Email	Signature
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				

Manager: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_