MCMINNVILLE PARKS & RECREATION DEPARTMENT – ADULT SPORTS ROSTER

SPO	RT:		MEN'S	: wo	MEN'S:	COED:
TEA	M NAME:		TEAM MANAGER	₹:		
ADDRESS:			HM PHONE:			
E-MAIL ADDRESS:			WK PHONE:			
The unde and cond Mc <i>N</i> such	player listed below agrees to playerstand that I may not play with an behavior and understand that the duct. I agree to assume all risk linnville, McMinnville Parks and Recaccident or injury. I am aware of	r information and complete all ay with the above listed team in nother team in this league without releague reserves the right, without of accident or injuries sustained foreation, McMinnville School District the risk and hazards connected with	a McMinnville Parks & elease from this contract refund, to expel any p from whatever cause #40 and their officers, o	Recreation E ct. I also agree layer or team in connection agents, and er	e to abide by from the lea therewith a mployees fro	y all league rules of plo gue for unsportsmanlik ind release The City m any and all liability f
agre \	e to sign below. Name (Print)	Billing Address	R - N	Phone	Signatu	re
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