



**CARROLL COUNTY COMMUNITY CENTER**  
**2015-16 MEN'S BASKETBALL WINTER LEAGUE**

TEAM NAME - \_\_\_\_\_

**Waiver & Release Form - Each Player Must Sign & Date**

I, the undersigned, fully recognize the inherent and potential risks of league and tournament games at the Carroll County Community Center, and fully understand that it is not the exclusive purpose of officials, sponsors, staff, and directors to serve as guardians of my safety.

I hereby release the Carroll County Community Center, its Board of Directors, staff, game officials, sponsors and representatives or assigns from any liability arising from any occurrence, whether foreseen or unforeseen, in connection with these games, which may result in injury, death or any damage due to my participation or association in these games and further waive any claim by me or my estate, heirs, or assigns, arising from any occurrence.

I further assume full responsibility for my physical fitness and ability to perform under conditions at each game.

I hereby certify that I am of lawful age and legally competent to sign this Waiver & Release and further certify that I am fully informed of the contents of the Waiver & Release. I also give permission for first aid.

Participant signature is required. Signature of parent/guardian is required for any person under the age of 18 years.

**PROMOTIONAL CONSENT**

I hereby authorize Carroll County Community Center, or other photography or videography company or designee to: photograph, record audio, record video, and/or interview me for the purpose of educating the community and/or to be used for promotional purposes by affiliated entities.

Team Member Printed Name	Signature	Date
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