ROSTER
REGISTRATION AND ACKNOWLEDGEMENT OF RISK

Team Name: _____

By signing below I recognize that the City of Rio Rancho, any of its sponsors, including other entities and their employees or agents, assume no responsibility for me. I acknowledge and assume all risks that arise from this participation. I also hereby waive any claims against the City of Rio Rancho, its co-sponsors, their department, officers, employees, or agents for any injuries or loss that arise from this participation. I acknowledge and retain the right to assert any claims that arise from the gross negligence or gross misconduct of the City of Rio Rancho or any co-sponsoring entities, their officers, employees, or agents. This form complies with all state and federal requirements.

COACH

1. Name: _____ **Phone #:** _____

Signature: _____

2. Name: _____ **Phone #:** _____

Signature: _____

3. Name: _____ **Phone #:** _____

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18. Name: _____ **Phone #:** _____

Signature: _____

19. Name: _____ **Phone #:** _____

Signature: _____

20. Name: _____ **Phone #:** _____

Signature: _____