



MPRD ADULT SPORTS WAIVER OF LIABILITY/PLAYER RECORD

(Print)

NAME _____ Date _____

ADDRESS _____

AGE _____ PHONE _____ DATE OF BIRTH _____

TEAM NAME _____

WAIVER OF LIABILITY

I do hereby certify that I have knowledge of my physical condition and state of health and give my consent to engage in the active sports and games program sponsored by the City Recreation Department. I do further certify that I have no known physical defects, disease or disability that will in any way jeopardize my health or physical condition if allowed to take an active part in this program. I hereby agree to and do hereby indemnify and hold harmless the City of Mobile and Employees of the City of Mobile, for any injury, accident, or mishap that may befall on myself while participating in any phase or aspect of the City Recreation Department's Sports and Games Program, or while being transported to and from games in all sports.

I give my permission for myself to participate in any of the sports listed below: Football, Basketball, Softball, Baseball, Track & Field, Soccer, Boxing, Swimming, and Cheerleading.

ATTACH PHOTO

Player Signature

Coach Signature

(Recent photo, No more than 2 years old)