ADULT LEAGUE ROSTER DATE ____ LEAGUE _____ CAPTAIN NAME TEAM NAME PHONE **EMAIL SIGN NAME PRINT NAME PHONE STREET ADDRESS CITY** (PARENTS SIGN IF UNDER 18)

SPONSOR FEE RECEIPT #

PLAYERS

By signing above you hereby release the Park & Rec Dept., City of Norwalk and all others from any and all liabilities incurred during competition or practice. You personally assume all responsility as a result of being permitted to participate in this proegram.

CAPTAIN

By signing this roster, I am stating that the above addresses are correct and that the above are legal participants.

TOTAL PLAYERS FEE