

BAY AREA SPORTS - ROSTER FORM

Team Name _____ Division _____

Manager's Name _____ Email _____ Phone Number _____

Asst. Coach's Name _____ Email _____ Phone Number _____

	NAME	AGE	DOB	BIRTH CERTIFICATE	
1				YES	NO
2				YES	NO
3				YES	NO
4				YES	NO
5				YES	NO
6				YES	NO
7				YES	NO
8				YES	NO
9				YES	NO
10				YES	NO
11				YES	NO
12				YES	NO
13				YES	NO
14				YES	NO
15				YES	NO



I hereby give my consent for my organization to participate in Bay Area Sports (BAS) Tournaments and extra curricular activities. I declare that the members of my organization are in good physical condition. I hereby give the staff of Bay Area Sports (BAS) permission to render such medical and hospital care as, in their judgment, may seem advisable for the members of my organization. I also hereby state that the members of my organization have adequate medical coverage and will not hold the staff, location of or sponsorship of Bay Area Sports (BAS) liable for any injuries incurred during this tournament or any extra curricular activities given by Bay Area Sports (BAS). In addition, I acknowledge that any activities or events that myself or my organization take part in on the way to or from the location of Bay Area Sports (BAS) Tournaments are not affiliated with Bay Area Sports (BAS) Tournaments. I also acknowledge that any after tournament activities mentioned at but not located at the location of Bay Area Sports (BAS) Tournaments are also not affiliated with Bay Area Sports (BAS) Tournaments; and I or we will not hold the staff, location of or sponsorship of Bay Area Sports (BAS) liable in any way, shape or form for what goes on before, at or after such activities. Also, anyone associated with my organization (Including Parents), agrees to follow all facility code of conduct rules. Failure to follow code of conduct rules may result in removal from not only the gym but facility premises.

By signing this document, I agree that all of the above information has been filled out accurately and understand that any deceitful, dishonest or false information may cause my team to forfeit a game or tournament.

Manager's Signature _____ Date _____

Asst. Coach's Signature _____ Date _____

You agree that by typing your name into the signature field it is the equivalent of your manual signature.