Team Roster Spring 2025

Due no later than 3rd week, or team could be dropped.

Beaumont Cherry Valley Recreation & Park District
390 W. Oak Valley Parkway, Beaumont, Ca. 92223
(951) 845-9555 phone (951) 845-9557 fax
www.bcvparks.com

Team Name:

Manager:

League Night:

Address:

Phone: **Cell #:**

E-Mail: **REQUIRED**

(Optional)

Assistant Mgr:

Address:

Phone: **Cell #:**

E-Mail:

AGREEMENT, WAIVER AND RELEASE

In consideration for being permitted by the above district to participate in any Adult Softball teams, I hereby waive, release and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance the above district (its officers, employees, and agents) from any and all liability arising out of, or connected in any way with, my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this activity involves and element of risk and danger of accidents and knowing those risks, I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above persons or entities free and harmless from any loss, liability, damage, cost or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said activity. I have read and agree to abide by the BCVRPD Code of Conduct

I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE ABOVE DISTRICT, AND I SIGN IT OF MY FREE WILL.

	NAME	ADDRESS	CITY	PHONE	SIGNATURE
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Once the original roster limit has been met you **MUST** use the Add/Drop Off form to add additional players