



ADULT BASKETBALL LEAGUE: SUMMER 2016
TEAM INFORMATION

Team Name: _____	Division: _____
Head Coach: _____	Assistant Coach: _____
Home Phone: _____	Home Phone: _____
Business/Cell: _____	Business/Cell: _____
Address: _____	Address: _____
E-Mail Address: _____	_____
_____	_____

For office use only:

Receipt #: _____ Date: _____

In the event of schedule changes or issues with the league, Bernalillo County Sports will attempt to contact the Head Coach, Assistant Coach, and then each player on the roster; therefore it is important that ALL players enter *CURRENT* contact information.

The Adult Basketball League season is administered on the following days:

Women's Division-Tuesday

Silver Division-Competitive -Sunday

Bronze Division -Monday

Sunday Recreation Division-Sunday Only

Wednesday Recreation Division- -Wednesday Only

Please note: Depending on the number of registered teams, an alternate playing day may be necessary. Please list **one alternate day** your team is able to play.

(Example: Wednesday Rec. Division/Alternate Day: Sunday, Bronze Division/Alternate Day; Saturday)

1st _____

2nd _____

3rd _____

HOLD HARMLESS AGREEMENT

I, _____, have read the general information packet and will **ensure that my entire team is aware of and will abide by the rules and regulations** that govern the Adult Basketball League. I also understand and agree to hold harmless the County of Bernalillo, Albuquerque Public Schools, Bernalillo County Employees and contractors, and those assisting with the Adult Basketball League from any claims, suits, actions or causes of action arising out of any accident/incident or conduct involving me, my teammates, or my family members. This includes but is not limited to the costs and reasonable attorney's fees associated with any claims, suits, actions or causes of action.

MANAGER/COACH DATE



Please complete the information requested from all players(below):

Team Name: _____ Division: _____

ROSTER (UNLIMITED)

Any player who enters his/her personal information and signs the roster agrees to have read the general information packet and agrees he/she will adhere to the rules and regulations governing the Adult Basketball League as well as the Hold Harmless Agreement **Each player must sign and provide all requested information. Team captain is not to fill out and sign for players.** Rosters will not be considered complete *unless EACH player's ORIGINAL signature and relevant information is included.*

Name (All names must be typed or written LEGIBLY , NO SIGNATURES in this box!	Signature	(Current) Phone	(Current) E-mail Address
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			