Des Plaines Park District

Waiver Form

Team Name: _____ **League:** _____

We, the undersigned, hereby acknowledge that each of us has read the waiver and release form on the reverse side and each of us, individually, hereby agrees to be bound by the terms of the said waiver and release.

Name	Address	Phone	Signature	WK1	WK2	WK3	WK4	WK5	WK6	WK7	WK8	WK9	WK10

I certify the above to be correct, _____

Signature of Team Manager / Captain

Each Player must sign their own signature, and this signature is for both the roster and Waiver & Release for all Claims Form