TULARE PARKS AND RECREATION

VOLLEYBALL ROSTER

MANAGER:	TEAM NAME:
PHONE #:	

EACH ROSTERED PLAYER MUST READ THE TEAM LIABILITY, HOLD HARMLESS PROVISIONS AND COMMUNICABLE DISEASE WAIVER AND SIGN ON THE LINE PROVIDED TO BE ELIGIBLE TO PARTICIPATE IN THIS LEAGUE.

TEAM LIABILITY, HOLD HARMLESS PROVISIONS

I, hereby, for myself, my heirs, executors, and administrators agree to and shall protect, indemnify and hold harmless the City of Tulare, and all officers, agents, representatives and employees thereof from any liability, claims or damages of whatsoever kind of character, including attorney's fees and costs of all types incurred in defense of any of said parties from said claims or liability, because of or arising out of, directly or indirectly, the acts or omissions of the participants, spectators, volunteers, employees, representatives, agents and invitees, and the passive or active negligent acts or omissions of the City of Tulare or its officers, employees and agents while acting within the scope of their duties regarding this activity/program. Said indemnification and hold harmless provisions shall be binding upon the participant whether or not there are any allegations of fault, negligence, or liability of the indemnities hereunder. I hereby agree that the use of any and all public facilities which are part of or subject to this indemnification clause shall be at all times, prior to ending of said program, shall be at my sole and exclusive risk. I further specifically agree that I shall indemnify and hold free of any liability the City of Tulare for any accident, loss or injury.

COMMUNICABLE DISEASE WAIVER AND RELEASE

Undersigned waives and releases the City of Tulare from any and all claims, causes of action, allegations that may arise relating to infection of any person by COVID-19 or other communicable disease that occurs, or is alleged to occur, during the event. Undersigned also agrees to defend, indemnify and hold the City of Tulare harmless from any and all claims, causes of action, allegations, or assertations made against the City of Tulare or its employees arising from or relating to actual or alleged infection occurring during the event, except where caused by the sole negligence or willful misconduct of the City of Tulare.

PLAYER NAME	MAILING ADDRESS	PHONE NUMBER	AGE	SIGNATURE REQUIRED