



CITY OF ESCONDIDO
Community Services Department
201 North Broadway
Escondido, CA 92025-2798
(760) 839-4691

SPORTS LEAGUE ADD CARD

Team Name: _____

(Circle Sport): SOFTBALL: Mens _____ Womens Coed-Sunday Coed-Monday
(Division)
BASKETBALL

Print Name: _____

Phone (Home) (____) _____ (Work) (____) _____

Address: _____ City: _____ Zip: _____

Date of Birth: Month _____ Day: _____ Year: _____

I understand and agree to abide by the rules and regulations governing the Community Services Department Sports Leagues. I understand that the City of Escondido does not carry insurance to cover participants or spectators of the Leagues. I hereby assume the risk of any injuries or death that I may sustain in the pursuit of sports League activities whether the same shall arise by the negligence of the City of Escondido, its officers, agents or employees or otherwise. I hereby forever discharge, release and covenant not to sue the City of Escondido, its officers, agents and employees from any damages, claims or causes of action that may result from any property damage or personal injury or death that I may sustain while using equipment owned or in the possession of the City of Escondido, or while engaged in any sports League-sponsored activities, whether the same shall arise by the negligence of any said persons, entities or otherwise.

I also agree to indemnify, defend and hold harmless, the City of Escondido, its officers, agents, and employees from any and all loss, damage, liability, cost or expense, arising out of or resulting from my participation in any sports League activities whether or not that liability, loss or damage is caused by, or arises out of, any acts or omissions of the City or its officers, agents, employees.

Player's Signature: _____ Date: _____

Player Dropped: _____

Manager's Signature: _____ Date: _____

Approved By: _____ Date: _____ \$2 FEE PER ADD CARD