



**City of Victorville Recreation and Library Department
RECREATION DIVISION**
 14973 Joshua Street ♦ Victorville, Ca. 92394 ♦ 760.245.5551
 Se habla Espanol por favor llame al numero 760.245.5551

ADULT SPORTS ROSTER • PLAYER ADDITION/DELETION

Team Name: _____ Manager's Name: _____ League: _____

DELETIONS

Request the following player(s) be deleted from my team as of _____
 (Date)

1. _____ 3. _____
 2. _____ 4. _____

ADDITIONS

****REMINDER: A team's roster may not exceed 16 players****

Request the following player(s) be added to my team as of _____
 (Date)

PRINT NAME	SIGNATURE	ADDRESS	CITY	ZIP	PHONE

AGREEMENT & RELEASE OF LIABILITY - RECREATIONAL PROGRAMS
 I have carefully read all provided liability waiver agreement and fully understand its contents.
 I am aware that this is a release of liability and a contract between myself and CSD and/or City and sign it on my own free will.

NOTE: This form must be turned into the Recreation Office, Recreation Staff, or official with the signature of the new player(s) before any new player can participate.