Incomplete rosters will not be accepted.

Spring

Summer ____ Fall

City of Albuquerque Parks and Recreation Official Flag Football Roster Form

____Men's

____Mixed

Date Due:	

N.O.P

____ Women's ____ Youth

		Classification				
property or employees of the property that may be sustained am familiar with the skills rec		any and all claims, demands, a ty in and about the premises. agree to practice and display g	ctions, suites, or proce I am in good health ar	eedings of any kind o nd have no physical o	or nature. I assume a condition that would	Il risk of injury to my person and prevent me form participating. I
Player's Name (Print or Type)		r's Signature	Phone	Identifica	ation #	Parent's-Guardian Signature (Only if minor)
1.						
2.						
2. 3.						
4.						
5.						
4. 5. 6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
16.						
17.						
18.						
19.						
20.						
Team Name		Manager Name City	State	1	Email	
AddressHome Phone	Business	City	Cell:		Zip Manager Signature	
Alternative Contact		Email		IV.	ianagei Signature_	
Home Phone	Busine		Cell:			
			Official Use Only			
Explanation	Amount	Cash/Check/CC	Date	R	eceipt #	Initials