



Sault Ste. Marie Touch Football Association Team Roster / Registration Form

Team Information:

Team Name: _____

Captain Name: _____

Captain Phone: _____

Captain Email: _____

Captain Mobile: _____

Alternate's Name: _____

Alternate's Phone: _____

Alternate's Email: _____

Alternate's Mobile: _____

I am the Team Captain and/or Alternate of the above named team, and I swear that all of the information supplied on this form is true and correct and that all of the players have signed below in their own handwriting. I further certify that the above named team and all of the players on this Official Roster Form are genuine and the team is operating under the auspices of the above named Association.

Captain's Signature: _____

Alternate's Signature: _____

WAIVER / RELEASE

The here and after individual person, and/or team and members of the forgoing league or association and all members thereof, the after signed, in consideration of being able to participate in Sault Ste. Marie Touch Football Association ("SSMTF") sanctioned events, I hereby agree to abide by the rules and regulations of the SSMTF in accordance with the Association's rules, regulations and by-laws. I hereby release myself, and for my heirs, executors, administrators and sponsors, the SSMTF, its affiliated leagues and associations, and every executive member, and every executive officer, director, sponsor, agent, representative and employee thereof, jointly and severally from obligations, liability, costs, claims and demand for damages whatsoever for any personal or other injury, including but not so as to limit the generality of forgoing any death or any loss, sickness or damage incurred by me anytime during my participation in any activity sanctioned by SSMTF, whether such personal or other injury, including death or any loss, sickness or damage arising out of, or in connection with the conduct of any said persons in organizing, supervising or conducting the activities of sanctioned events. I hereby irrevocable grant to SSMTF, the exclusive right to permit or authorize any person, firm or corporation to take and make use of any photographs, motion pictures or television broadcasts, as well as the reproduction of my name in connection with my participation in SSMTF exclusively and may be used, reproduced, distributed and otherwise disseminated by SSMTF directly or indirectly in any manner they desire. I further represent and warrant that I will not participate in any event unless I continue to be in good health and have no physical condition that would prevent me from participating in these events. I further agree not to make any claim or proceedings against any person, firm or corporation who might claim contribution or indemnity under the provisions of the Negligence Act and Amendments thereto (or similar legislation which provides with respect to contributory negligence) from any of the parties having benefit from this release.

