



2017 USA Broomball National Tournament Roster



TYPE OR PRINT LEGIBLY AND COMPLETE ALL ENTRIES THAT APPLY

Team Name _____ League _____ Division: Men's A B C D Women's Co-rec A B

(Circle One)

Manager's Name _____ Address _____ City _____ State _____ Zip _____

(To be eligible as a player, team manager must also be listed under players section)

PLAYER STATEMENT **Each player shall read the following statements before signing the roster.** I am a member in good standing of the above team and I am eligible under USA Broomball eligibility rules to compete with this team in USA Broomball tournament play. I understand that I may participate in only one USA Broomball post-season tournament in the same division of play and my signature may appear on only one post-season tournament roster in the same division of play. "Divisions of play" are women's, men's and co-rec. I agree to abide by the rules and regulations established for USA Broomball play.

HOLD HARMLESS WAIVER OF LIABILITY: I, the undersigned player, acknowledge, agree and understand that: 1. Voluntarily and of my own free will, I elect to participate as a member of amateur sports team and tournament indicated above. 2. I understand that there are certain risks and hazards involved in participating in sports that may result in injury or death to me or other players, including, but not limited to those hazards associated with weather conditions, playing conditions, equipment and other participants. 3. I understand that the very nature of sports participation is hazardous and risky, including, but not limited to, hitting or catching a ball, blocking, checking, swinging a broom, running, jumping, stretching, sliding, diving, and collisions with other players and with stationary objects, all of which can cause serious injury or death to me and to other players. Further, I, the undersigned player, agree that in consideration for the right to play as a member of the team designated above and in consideration for permission to play on the courts, rinks or fields arranged for by the team or tournament: 1. I voluntarily elect to accept and assume all risks of injury incurred or suffered by me (a) while practicing or playing as a member of the team so designated, (b) while serving in a non-playing capacity as a team member during practice or play by other teams or by both players on my team, and (c) while on or upon the premises of any and all of the facilities arranged for by my team or tournament for practice or play. 2. I release, discharge and agree not to sue the team and tournament designated above, the facility owner or other entity designated above, USA Broomball, the Minnesota Sports Federation, Inc., or their owners, officers, agents, servants, associations, employees, or any person or entity connected with the team, tournament, facility, USA Broomball, or Minnesota Sports Federation for any claim, damages, costs or cause of action which I have or may in the future have as a result of injuries or damages sustained or incurred by me from whatever cause including but not limited to the negligence, breach of contract or wrongful conduct of the parties hereby released.

PRINT OR TYPE NAME	PLAYER'S SIGNATURE	RESIDENCE ADDRESS	CITY	STATE	ZIP	BIRTHDATE

Statement of Team Manager: We hereby verify that each player appearing on this USA Broomball National Tournament Roster physically resides within the USA and is not on another team's roster in the same division of play. Also, all of our players are in good standing with our local USA Broomball Association and USA Broomball.

Manager's Signature

Email Address

TEAM MANAGER CHECKLIST FOR TOURNAMENT PLAY

- Signatures of all players must be on this official tournament roster.
- All players must have a USA driver's license I.D.
All of the above requirements must be met at team check-in and throughout tournament play.