Hendersonville Parks
Adult Pickleball – Official Roster Form

TEAM:_____ EVENT / LEAGUE: _____ YEAR: _____

COACH: _____ ADDRESS: _____

PHONE: (HOME) _____ (WORK) _____ (CELL) _____

EMAIL: _____

*Waiver: By signing the roster below, each player agrees to not hold the Hendersonville Parks Department or any of it's employees liable for any accident or injury that may occur during any game, practice, or events pertaining to the Hendersonville Parks & Recreation Department Adult Sports League / Event. Players under the age of 18 must have a parent / legal guardian signature that denotes understanding and acceptance of this waiver in addition to the city's concussion and sudden cardiac arrest policies. Signature certifies that all information reported above is true and accurate.

Print Player's Name	Player's Signature	Street	City	DOB	Parent/Guardian Signature (if under 18)
1					
2					
3					
4					

Captain's Signature and Date: _____