

ASSUMPTION OF RISK FOR PLAYING KICKBALL IN THE LRKA SPRING 2011

In consideration of my voluntary participation in playing KICKBALL, I assume the inherent risks (potentially resulting in injury or death) related to the playing of this or any sport. I agree that I and my heirs indemnify and hold harmless The Little Rock Kickball Association and all involved organizers and staff from all claims, actions, or liabilities (including reasonable attorney fees and costs) from any claim, action, or liability arising out of or relating to my participation in the playing indoor kickball.

TEAM NAME:	CAPTAIN:
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	NAME	SIGNATURE	DATE
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As captain, I have seen that all of my players have read and signed the assumption of risk statement. Any player who does not sign this waiver by 3/18/11 will not be considered a legal player in the LRKA and I understand that my team could be asked to forfeit any games involving illegal players. Furthermore, players who have not signed this statement will be dropped from rosters.

Captain's Signature: _____ Date: _____