Acosta Sports
4312 Delta Drive
El Paso, TX 79905
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3/27/2009
2:02 PM

SPORTS - ADULT BASKETBALL LEAGUE TEAM ROSTER

www.elpasotexas.gov/parks

(Circle One:) Men's Open Basketball **Men's** _____ **& Over** Basketball **Women's Open** Basketball
(Age)

League Name: _____ **Location:** _____ **Days: S-M-T-W-TH-F-S**
(Acosta, Carolina, Postal, Hospital) (Center Name) (Circle Dates of League)

(Please Print)
TEAM NAME: _____

COACH / TEAM CAPTAIN: _____ PHONE No.: _____ PHONE No.: _____
ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
E-mail: _____

ASSISTANT: _____ PHONE No.: _____ PHONE No.: _____
ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
E-mail: _____

***** Note: If any Information changes, it is your responsibility to let us know. IDS REQUIRED FOR EVERY GAME.*****

No.	PLAYERS (Complete First and Last Names)	PHONE:	SIGNATURE:	(Office Use Only) Player Contract
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				

Rosters and Player Contracts due BEFORE 1st game. After 1st game $5.00 Fee per Transaction. Only players who are on the roster will be allowed to play. Players can be added/dropped BEFORE the 3rd game with a **Revised Roster is Required**. **No Roster, No Player Contracts = Forfeit game(s).** Schedules available only at **www.quickscores.com/elpaso.**

THIS IS A COMPETITIVE SPORT, INJURIES MAY OCCUR AND WILL BE THE SOLE RESPONSIBILITY OF THE INDIVIDUAL WHO CHOOSES TO PARTICIPATE IN THIS EVENT. PLAYERS ARE EXPECTED TO BE ALERT AT ALL TIMES AND IN GOOD PHYSICAL CONDITION. AS IS EXPECTED BEFORE TAKING PART IN ANY PHYSICAL ACTIVITY, ALL PLAYERS SHOULD HAVE PHYSICIAN'S APPROVAL.
THE CITY OF EL PASO, TEXAS, ATTEMPTS TO MAINTAIN AND INSPECT ALL PLAYING AREAS, THE CITY CAN NOT GUARANTEE THAT ALL AREAS WILL BE IN PERFECT CONDITION. ALL PLAYERS ARE CHARGED WITH AND REQUIRED TO INSPECT THE PLAYING AREA PRIOR TO THE BEGINNING OF ANY ACTIVITY. THEY AE FURTHER REQUIRED TO REPORT ANY PROBLEMS TO THE CITY FOR IMMEDIATE ACTION OR CEASE THE ACTIVITY IF THE SITUATION CANNOT BE CORRECTED. THE PLAYERS ARE RESPONSIBLE FOR THEIR SPECTATORS AND GUESTS ATTENDING THE GAME AND SHOULD SUPERVISE THEM TO ENSURE THAT NO ACCIDENTS OCCUR.

(IMPORTANT: Be sure to ASK for a Signed Copy by the Staff of the Roster when you turn it in.)
I HEREBY CERTIFY AS THE HEAD COACH / TEAM CAPTAIN THAT THIS ROSTER IS ACCURATE AND COMPLETE:

SIGNATURE: _____ **DATE:** _____

T-shirt Sizes for your Team Players, 12 Maximum T-shirts per team. Awards as per LEAGUE RULES.

Small:_____ **Medium:**_____ **Large:**_____ **X-Large:**_____ **XX-Large:**_____

Staff Signature: _____ **Date:** _____

Rules, Rosters, and Player Contracts available online at **www.elpasotexas.gov/parks** under the Sports Section Heading listed on the left side of screen.