

Team Name	



Tournament Date _____

Head Coach		Assistant Coach				
Cel Number	Cel Number					
ROSTER AND PARTICIPATION In consideration of being allowed to participate, each participar sponsoring organizations, and their employees, members, and video of participants at event sites, and BGCBP retains the right are also, stating that you a	representatives fr to use any such v	rom any claims or video or photogra	liability. As furthe phs for publicity a	injury, accident or loss of any kind and hereby relief or consideration to participation, each participant	and their legal representative consents to BGCBP taking paxtend to any and all events of The BGCBP. By signing this	hotographs and
Player	Jersey Number	DOB	Grade	Parent/Guardian	Contact Number	Date
	- Tumber		Grade	Farenty Guardian	Contact Number	- Juic
As coach, I will accept full responsibility for the conduct of my players, sportsmanship among all of us, win or lose. I further agree that my pla BGCBP. I affirm and pledge that each of the players listed above is elig	yers, coaches, fans	s and I will be bound	d by the Rules and	Regulations of the	Head Coach Signature	
					ricau coacii signature	