CARRBORO RECREATION AND PARKS DEPARTMENT
ADULT LEAGUE PLAYER CONTRACT

Note: This form must be completed and returned to the Athletic Program Supervisor before you are eligible to participate in any league game. Failure to submit a completed contract will result in you being ruled ineligible.

LEAGUE / ACTIVITY _____

TEAM _____ YEAR _____

I, _____, hereby agree to participate in the
(Print Name)
above stated sport, league, and team. I meet all eligibility requirements* and understand that I can receive no remuneration for playing. I have read and am aware of all rules governing play. I will, upon my honor, live up to the aims and ideals of good sportsmanship and promise to obey the rules and regulations established by the Carrboro Recreation and Parks Department. My failure to do so will automatically suspend me from further league competition. I also understand that insurance is available at a small fee from the Recreation and Parks Department upon request and that the Carrboro Recreation and Parks Department and the Town of Carrboro are not responsible for any damages or injuries incurred.

_____ _____
Player's Signature Date

_____ _____
Parent/Guardian Signature (If Under 18) Date

_____
Address Street City Zip Code

Phone Numbers: Home _____ Work _____

Are you a resident of Orange County? _____ yes _____ no

If yes, do you live within the town limits of Carrboro? _____ yes _____ no
Chapel Hill? _____ yes _____ no

* Those players who reside outside of Orange County must pay a pre-determined **out-of-county fee** in order to become eligible to participate each season.