AMERICAN ROUNDBALL CORPORATION - LEAGUES AND TOURNAMENTS

Name of Team/Organization | League or Tournament | Division

Uni #	NAME OF PLAYER	BIRTHDATE	GRADE

I, the team coach, declare that the birthdates and grades on this roster are correct. I hereby certify that the members of the team named above meet the age requirements stipulated by ARC, and that each of the above-named players is covered by a proper accident policy of insurance. In consideration of your accepting this TEAM ROSTER, I hereby, for myself, my team, heirs, executors, administrators and assignees, waive and release any and all rights and claims for damages I may have against American Roundball Corporation and league or tournament sponsors for any injury or damages incurred at said tournament. I understand that unsportsmanlike conduct will not be tolerated, and could result in my team's dismissal from the tournament without refund.

DATE | Print Name of Coach or Team Representative | Signature | E-MAIL ADDRESS

ADDRESS | CITY | STATE | ZIP | HOME PHONE | FAX