



City of Seneca Men's Basketball League Contract

Team Name: _____

I understand that the City of Seneca Recreation Department **does not provide accident insurance and that any injury I may incur is my own responsibility.** I further understand that with the signing of this contract I assume all risks and hazards incidental to playing in this league. I do further hereby release, absolve, indemnify and hold harmless the City of Seneca Recreation Department or any of the supervisors appointed by them. I do hereby certify all the above information to be correct and true.

I also understand that there will be a **ZERO TOLERANCE POLICY** on the possession of a weapon and/or consumption of alcoholic beverages/drugs or being under the influence of alcohol/drugs, on COS property. The police will be called on anyone suspected of violating this policy. What this means is that the first time someone is caught, **the police will be called, and the TEAM will be removed from the league with no refund of their fees.**

Print Name: _____

Signature: _____