

Apple Valley Parks & Rec

# Adult Kickball League



## Lenny Brewster Sports Center

21024 Otoe Rd  
Apple Valley, Ca 92307

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**Ages**  
18 & up

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**Wednesday, Starts March 8**  
6:00-10:45 pm

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**Cost**  
\$225/ team  
Registration Deadline 3/2  
Pre-Season Managers Meeting 3/3

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For more info:  
[AVrecreation.org](http://AVrecreation.org)  
760-240-7880



**Town of Apple Valley  
Parks & Recreation Dept.**  
14955 Dale Evans Parkway  
Apple Valley, CA 92307  
(760) 240-7880

**You remember the game from your youth, now it's time to get your co-ed team together and join us for 8 weeks of kickball followed by single elimination playoffs.**



**2017 Spring Co-ed Kickball League  
Team Roster  
Town of Apple Valley  
Recreation Department  
Agreement, Waiver, Release**

I, the undersigned, understand the following:

I am aware that recreational activities can be hazardous and I am voluntarily participating in these activities with knowledge of the hazards involved and hereby agree to accept any and all risks of injury or death. The Town is not responsible for participants injuries or damages occurring from "hazardous recreation activities" (CA Government Code 831.7). The Town does not provide participants with medical insurance or treatment for injuries. I agree to hold harmless and release the Town of Apple Valley, its officers, agents and employees from any and all liability arising from or related to my participation in Town of Apple Valley program activities. This release includes, but is not limited to, all liability for death, personal injury or property damage resulting from the active or passive negligence of the Town of Apple Valley or its agents or any defective or hazardous condition of any property or equipment owned, operated or maintained by the Town of Apple Valley. I am responsible for any loss, theft or damage to either personal or Town equipment, articles or facilities while using said equipment, articles and/or facilities.

**Team Name:** \_\_\_\_\_ **Email** \_\_\_\_\_

**Manager:** \_\_\_\_\_ **Phone No.** \_\_\_\_\_

	Name (Print)	Signature	Phone	Date
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				

\*Please turn in a completed roster along with your \$225 team fee to the Town Hall Recreation Center. Any questions call (760) 240-7880.