



# Skagit County Parks and Recreation

1730 Continental Place – Mount Vernon, WA 98273  
 360-416-1350 – [parksrec@co.skagit.wa.us](mailto:parksrec@co.skagit.wa.us)  
[www.skagitcounty.net/parks](http://www.skagitcounty.net/parks)

# Official Basketball League Roster & Contract

Please Print Name of Team: \_\_\_\_\_ League Name: 2025 SPRING WOMEN'S 5-ON-5 BASKETBALL LEAGUE

Print Managers Name: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_ Each player signing this Roster and Contract should read the following statement **before** signing and completing.

I assume all risks of injury incurred or suffered by me while at, or participating in the above named activity. I waive, release and agree not to sue Skagit County, its Parks, Recreation and Fair Department, its elected officials, heirs, Agents, executors or administrators; contracted sports officials, scorekeepers, and instructors; Skagit Valley College; and Mount Vernon School District from any and all rights, claims or losses sustained by me while at, or participating in this activity. I, the undersigned, acknowledge that I have read this statement in its entirety, and understand and agree to the terms of this waiver and contract.

**Print or Type  
Player's Name:**

**Player's Signature:**

**E-Mail:**

**Cell Phone Number:**

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