

Church Name: _____

Captain Name: _____

Division: _____ Middle School

_____ High School

_____ College/Adult

	Players Name	Age	Grade	Player's Signature	Parent/Guardian Signature
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

***Signing of this Roster also indicates the team members will abide by the O2 Ministries Kickball Rules and By-laws and will comply with the medical/Liability/video release below.**

Medical/Liability/Video Release

I hereby give my permission for the above signed to participate in this program/activity. I authorize O2 Ministries, Inc to obtain necessary medical care and treatment for the participant/child for any illness or injury occurring during the program, but I understand that O2 Ministries, Inc is not assuming duty to obtain medical treatment, make medical decisions, or render medical care or treatment to the participant/child. I understand that O2 Ministries, Inc has NO ACCIDENT or MEDICAL PAYMENT INSURANCE COVERAGE for the participant/child and I agree to pay all reasonable medical costs incurred if treatment is obtained. I understand that O2 Ministries, Inc. assumes no responsibility or liability for lost, stolen, or misplaced items. I release O2 Ministries, Inc. and its agents, servants, volunteers, and employees from all claims, actions, causes of action and rights of recovery or reimbursement of any type that I or the child have or may have in the future which arise from or are related in any manner to the program/activity including but not limited to (claims of bodily injury and property damage or loss) and I assume all risks and hazards incident to such program and transportation to and from the same. I also give permission for O2 Ministries, Inc. to take and/or videos of/during activity for publicity use. This instrument is signed both on behalf of the individual.