Motown Showdown Team Roster/Waiver Form

| TEAM NAME: | | | | |
|------------------|---------------|-------|---------|-------|
| Head Coach: | Phone #: | | Email: | |
| Assistant Coach: | Phone #: | | Email: | |
| Player | Date of Birth | Grade | Phone # | Email |
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I hereby certify that all information is correct and in consideration or participating in this or any Motown Showdown event, that I assume full responsibility for all my players and coaches under my team name and that they agree not to hold responsible the Motown Showdown members, staff, or other employees on account of any injury or loss or damage suffered as a result of a player participating in this event or any Motown Showdown event, including but not limited to games, practices, travel to and from these activities.

| Coach's Signature: | Date: |
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