

Roster and Waiver
**2009 ACIS Regional Flag Football
Tournament at the University of Nebraska**

Please have all participants read and sign the release and indemnity agreement below

By my signature below, I hereby recognize and acknowledge that Campus Recreation of the University of Nebraska does not carry special health and/or hospital insurance, other than such medical and hospital services as are normally provided for students by the University Health Center. I hereby recognize that there are certain risks inherent in participating in the Regional Flag Football Tournament at the University of Nebraska, which I hereby voluntarily assume. I will hereby release the Board of Regents of the University of Nebraska, Campus Recreation, ACIS and their sponsors, and all of their employees and agents from all claims on account of injury which may be sustained while participating in this tournament and, or any related activity, events, or services provided during the tournament.

Team Name: _____ **Institution:** _____

	Player's Printed Name	Player's Signature	SS/ID Number	Year in School	Hometown
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____
7.	_____	_____	_____	_____	_____
8.	_____	_____	_____	_____	_____
9.	_____	_____	_____	_____	_____
10.	_____	_____	_____	_____	_____
11.	_____	_____	_____	_____	_____
12.	_____	_____	_____	_____	_____
13.	_____	_____	_____	_____	_____
14.	_____	_____	_____	_____	_____
15.	_____	_____	_____	_____	_____
16.	_____	_____	_____	_____	_____

This is to confirm our institution's participation as a team in the Regional Flag Football Tournament to be held on the campus of the University of Nebraska, November 13-15, 2009. I hereby certify that all of the above listed names meet the tournament's eligibility requirements.

Recreational Sports Director's Signature: _____