North Dakota Amateur Basketball Incorporated Team Roster • 2021-2022

Div	ision:		
City or Town			
Feam			
eam Manager	Manager's Address		
City	State	Zip	
Manager's Home Phone	Work Phone		
E-Mail Address			

I, and all my executors, administrators hereby waive and release any and all rights and claims against the North Dakota Amateur Basketball organization and the Bismarck Parks and Recreation District such as injuries, which may result while participating in association play and league play.

PLAYER'S NAME	SIGNATURE	ADDRESS	HT	DOB	AGE
					1
			1		
"Pick-up Players" (for State Tou	rnament only). Must be approve	ed by local league representative)		

Return on or before **October 15, 2021** to:
Bismarck Parks and Recreation District
400 East Front Avenue • Bismarck, ND 58504

The undersigned officials certify that the above named players are eligible under the Incorporated Rules and Regulations.

Signature of Team Manager or Player	