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Church Name

Address

Church Phone

As pastor, I certify that the below listed players are regular participants in the activities of this church

Pastor's Name

Signature

Coach's name

Address

Phone Number

Birth date

E mail address

Signature

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Player's Name	Home/Cell Phone	Birth date	Signature (required)
1			
2			
3			
4			
5			
6			
7			
8			
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11			
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24			

I HAVE READ THE RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT ON THE REVERSE, FULLY UNDERSTAND ITS TERMS, AND UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT. MINORS MUST HAVE ADDITIONAL PARENTAL/ GUARDIAN PERMISSION FORM SIGNED AND ATTACHED WITH ROSTER.

Player Injury Waiver

Due to the nature of the sport of softball, contact with the ball, the ground, and other players is an inherent risk, and to be expected. There is a risk that this contact may result in injury. I understand and accept this risk, and I agree not to hold the coach, _____ Church, or Rochester Suburban Church League responsible for any injury to myself which results from a natural part of the sport. I realize that I retain all rights in cases where negligence, and/or willful, unlawful behavior should cause such injury.

Further, I accept the responsibility to be properly outfitted and equipped for the sport of softball and to abide by all rules of play and conduct set forth by the league and sanctioning association. Should injury occur from my failure to comply with the above, I accept and acknowledge sole responsibility for such injury is mine alone.

By signing this roster document I affirm that I completely understand and accept the above conditions.