2016 Memorial Bash Tournament Roster Form

Team Name: _____

2014 CBL Memorial Bash, Player Roster and Waiver, Release of Liability and Indemnification Agreement: I the undersigned player (guardian), acknowledge, agree and understand that, voluntarily and of my own free will, elect to participate as a member of the baseball team and tournament indicated herein. I understand that there are certain risks and hazards involved in participating in baseball that may result in injury or death to me or other players, including but not limited to those hazards associated with weather conditions, playing conditions, equipment and other participants. I understand that the very nature of the game of baseball is hazardous and risky, including, but not limited to, the acts of pitching, throwing, fielding and catching the ball, the swinging of the bat, running, jumping, stretching, sliding, diving and collisions with other players and with stationary objects, all of which can cause serious injury or death to me and other players. Further, I, the undersigned player (guardian), agree that in consideration for the right to play as a member of the team designated herein and in consideration for permission to play on the fields arranged for by the team or Tournament Directors, I voluntarily elect to accept and assume all risks of injury incurred or suffered by me (a) while practicing or playing in the tournament and as a member of the team so designated, (b) while serving in a non-playing capacity as a team member during practice or play by other teams or by other players on my team, and (c) while on or upon the premises of any and all of the fields arranged by my team or tournament directors or league for practice or play. I release, discharge and agree not to sue the team and/or Centerville Baseball League and the Centerville-Washington Park District, or the Tournament directors, officers, agents, servants, associations, employees or any person or entity connected with the team, tournament, or field owners for any claim, damages, costs or cause of action which I have, or may in the future have, as a result of injuries or damages sustained or incurred by me from whatever cause including but not limited to the negligence, breach or contract or wrongful conduct of the parties hereby released.

Player Name	Date of Birth	Address	Parent Signature

Age Division: _____ Insurance Carrier: _____

Manager's Name: _____ Policy Number: _____

Manager's Signature: _____ Date: _____