# WORLD SOFTBALL LEAGUE (WSL) ROSTER FORM

## WSL PLAYER WAIVER, RELEASE OF LIABILITY/INDEMNIFICATION

## AGREEMENT AND SANCTIONED INVITATIONAL TOURNAMENT TEAM MEMBERSHIP APPLICATION

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**Team Name**_____ **Team Home Base**_____
**Team Manager**_____**Address**_____
**City**_____ __**State**_____**Zip**_____ **Phone H** _____**W**_____

**Circle Team Classification: A B C D E Men's Women's Coed**

**HOLD HARMLESS WAIVER OF LIABILITY:** I, the undersigned player, acknowledge, agree and understand that: 1. voluntarily and of my own free will, I elect to participate as a member of the softball team and league indicated above. 2. I understand that there are certain risks and hazards involved in participating in softball 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. 3. I understand that sliding into base is dangerous to me and to other players and may result in serious injury or death. 4. I understand that the very nature of the game of softball is hazardous and risky, including, but not limited to, the acts of pitching, throwing, fielding and catching of 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 to other players. Further, I, the undersigned player, agree that in consideration for the right to play WSL/ASA member of the team designated above and in consideration for permission to play on the fields arranged for by the team or league: 1. I voluntarily elect to accept and assume all risks of injury incurred or suffered by me (a) while practicing or playing 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 both players on my team, and (c) while on or upon the premises of any and all of the fields arranged for by my team or league for practice or play.2. I release, discharge and agree not to sue the team and league designated above, the field owner or other entity designated above, the WSL/ASA, or their owners, officers, agents, servants, associations, employees, or any person or entity connected with the team, league, field or WSL/ASA 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 of contract or wrongful conduct of the parties hereby released.

| PRINT OR TYPE NAME | PLAYER'S SIGNATURE | CITY/STATE | E-MAIL ADDRESS |
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Roster is limited to a maximum of 20 players. Roster limits include player/manager. **Statement of Team Manager:** I hereby certify that our team is in good standing with the WSL/ASA and each player appearing on this form qualifies under the eligibility rules which govern our local sports community play. I understand that if our team is not WSL/ASA registered it must do so prior to commencing tournament play. I also understand that violation of the eligibility rules will result in automatic disqualification from WSL/ASA tournament play and may result in suspension from tournament play.

Team Managers Signature_____ Date_____

**Attention Sanctioned Tournament Director: Use this waiver/roster form for all teams that are not current WSL member teams and are playing in your tournament. Must be accompanied by $20.00 team membership fee.**