

ASA OFFICIAL WAIVER & RELEASE OF LIABILITY & INDEMNIFICATION FORM



20 ASA OFFICIAL NATIONAL CHAMPIONSHIP ROSTER Qibwe Braves

Year 20 Team Name Qibwe Braves City & State _____ Division & Classification of Championship Play (men/women/boys/girls, slow pitch/fast pitch, 14-under, church, etc.) _____

- 1) Each player should read the statement on opposite side before completing and signing this roster.
- 2) Parents/Guardians signature should be on the same numbered line below as the players' name.
- 3) Players are subject to the ASA Drug Control Procedures and Policies as provided in the ASA Code.

NOTE: Team accident insurance is not provided for ASA National Championship play. ASA has made available the voluntary purchase of team accident insurance. See your ASA commissioner for information.

*By initialing in the column below, you acknowledge you have read and understand the liability waiver and player affidavit information on the reverse side.

PRINT OR TYPE PLAYER'S NAME	DATE OF BIRTH	PLAYER or PARENT/GUARDIAN SIGNATURE	BONAFIDE RESIDENCE (Street, City, State, Zip)	EMAIL ADDRESS (optional)	INITIALS*
1. Terrance Ray White Jr		Terrance R White Jr.			TRW
2. Michael Staples		Michael Staples			MS
3. Henry Grayhawk		Henry Grayhawk			HGAH
4. Cory J. White		Cory J. White			CJW
5. Aaron Jackson		Aaron Jackson			AJ
6. Pete Jones		Pete Jones			PJ
7. Christopher E. White		Christopher E. White			CEW
8. Scott Graves		Scott Graves			SG
9. Daniel Jackson		Daniel Jackson			DJ
10. Fred Jackson		Fred Jackson			FJ
11. Louie Grayhawk		Louie Grayhawk			LGH
12. Dan Brown					
13. omarie Jordan					
14. Derek Nason		Derek Nason			DN
15. Curtis Jackson					
16. Justin Jackson					
17.					
18.					
19.					
20.					