

**ASA ♦ USA-MSF PLAYER WAIVER, RELEASE OF LIABILITY/INDEMNIFICATION  
 AGREEMENT AND SANCTIONED INVITATIONAL TOURNAMENT  
 TEAM MEMBERSHIP APPLICATION**



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Please type or print and complete all entries below. All entries must identically match those previously submitted to the sports community in which your team competes and is registered.

Team Name Crown Hill Sports Community \_\_\_\_\_  
 Team Manager Billy Fisher Address \_\_\_\_\_  
 City Bemidji Zip \_\_\_\_\_ Phone H (218) 556-7956 W ( ) \_\_\_\_\_

Sanctioned Tournament you registered at: \_\_\_\_\_

Circle Team Classification: AA A B

Circle Team Division: Men's Slow Men's Fast Masters Slow Co-Rec Slow Men's Modified  
 Women's Slow Women's Fast Masters Fast Church Slow Women's Modified

**PLAYER STATEMENT** Each player shall read the following statements before signing the roster. I am a member in good standing of the above team and I am eligible under local sports community and ASA ♦ USA-MSF eligibility rules to compete with this team in local sports community and ASA ♦ USA-MSF tournament play. I understand that I may participate in only one ASA ♦ USA-MSF post-season tournament in the same division of play and my signature may appear on only one post-season tournament roster in the same division of play. For the definition of "divisions of play" please see the applicable ASA ♦ USA-MSF Sports Guide. I agree to abide by the rules and regulations established for local sports community and ASA ♦ USA-MSF play.

**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 as a 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 fieldowner or other entity designated above, the Amateur Softball Association of America-Minnesota Sports Federation, or their owners, officers, agents, servants, associations, employees, or any person or entity connected with the team, league, field or Amateur Softball Association of America-Minnesota Sports Federation 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	PARENTS SIGNATURE (MINORS ONLY)	CITY
1. Terrell	<i>[Signature]</i>		Bemidji
2. Jeremy	<i>[Signature]</i>		Bemidji
3. Dave Nelson	<i>[Signature]</i>		Bemidji
4. Billy	<i>[Signature]</i>		Bemidji
5. MOKE	<i>[Signature]</i>		Bemidji
6. KOLIKIN KRS	<i>[Signature]</i>		Bemidji
7. BRETT GREGG	<i>[Signature]</i>		Bemidji
8. OPAUS BRAN OPAUS	<i>[Signature]</i>		Bemidji
9. NICH SCHRAUS	<i>[Signature]</i>		Bemidji
10. CORA	<i>[Signature]</i>		Bemidji
11. Derek Lead	<i>[Signature]</i>		Bemidji
12. Paul Wupper	<i>[Signature]</i>		Bemidji
13. Eric Moe	<i>[Signature]</i>		Bemidji
14. Tyler Acosta	<i>[Signature]</i>		Bemidji
15.			
16.			
17.			
18.			
19.			
20.			

Roster is limited to a maximum of 20 players (slowpitch) and 18 players (fastpitch). Roster limits include player/manager. Statement of Team Manager: I hereby certify that our team is in good standing with the MSF 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 MSF 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 MSF sanctioned tournament play and may result in suspension from league play.

Team Managers Signature \_\_\_\_\_ Date \_\_\_\_\_

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