

BEMIDJI AREA SOFTBALL ASSOCIATION (BASA)

David White, League Director 759-0854

OFFICIAL TEAM ROSTER

PLAYER WAIVER, RELEASE OF LIABILITY

Wanda Graves PO Box 776 Red Lake Minn 56671
 MANAGER'S NAME MAILING ADDRESS

Seven Clans 49ers 219-679-2500 EXT 224 219-679-3653
 TEAM NAME TELEPHONE - HOME TELEPHONE WORK

MEN'S: DIV I _____ DIV II _____ DIV III _____ 35+ _____ WOMEN'S: DIV I _____ DIV II _____

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-MSF eligibility rules to compete with this team in local sports community and ASA-MSF tournament play. I agree to abide by the rules and regulations established for local sports community and ASA-MSF play. HOLD HARMLESS WAIVER OF LIABILITY: I, the undersigned player, acknowledge, agree and understand that: 1. I understand that there are and voluntarily elect to accept and assume all risks of injury incurred or suffered by me while participating in softball. 2. I release, discharge and agree not to sue the team, league, or BASA Board 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.

PLAYER NAME	ADDRESS	PHONE	DOB	SIGNATURE
1. Alekzie Shaver				
2. Star Shaver				
3. Michelle Schaff				
4. Taylor Dickerson				
5. Kristin Brown				
6. Eric Brown				
7. Cara Donnell				
8. Monica Brown				
9. Jackie Brown				
10. Jami Parkow				
11. Carol Muller				
12. Ann Whitford				
13. Paula Roy				
14. Melissa				
15. Arlene Staples				
16.				
17.				
18.				
19.				
20.				