ROSTERS: TEAMS WILL NOT BE PUT ON THE SCHEDULE WITHOUT A COMPLETE AND SIGNED ROSTER FORM. ROSTERS MUST BE TURNED IN ON OR BEFORE THE LEAGUE DEADLINE.

Coeur d'Alene Softball Roster

	TEAM NAME MANAGERS NAME E-MAIL ADDRESS MAILING ADDRESS	PHONE			
	CITY / STATE / ZIP GAME NIGHT	LEAGUE		YEAR	
PLAYER NAME		ADDRESS/CITY		PLAYER SIGNATURE	

- PLAYER WAIVER: I the above signed player, acknowledge, agree, and understand that:

 (1 Voluntarily and of my own free will, I elect to participate as a member of the above named softball team and league.

 (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.

 (3 I also release, discharge, and agree not to file suit against the team, umpires, ASA, Idaho ASA, and/or the City of Coeur d'Alene.

MANAGER SIGNATURE	COMMISSIONER SIGNATURE	