

2024 League Roster/Waiver Form

In consideration of being allowed to participate in any way in the SISBL sponsored baseball tournament, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from the activities involved in the program is significant, including the potential for permanent paralysis and death and while particular rules, equipment, and personal discipline may reduce the risk, the risk of serious injury does exist.
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume all responsibility for my participation.
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately.
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS THE SOUTHERN ILLINOIS SELECT BASEBALL LEAGUE, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT. PARENTS/GUARDIANS SIGNATURE FOR SHOULD BE ON THE SAME NUMBERED LINE AS PLAYER'S NAME APPEARS ON THIS ROSTER. By signing this roster, parent or legal guardian agrees to the above statements and verifies that the date of birth is correct. Parent or legal guardian of each youth player must sign below.

Team Name: Route 3 Riots

Age Division: 11 U

Coach Name: Justin Chism

Coach Name: Nathan Bise

Coach Name: John Green

Coach Name: Denny Davis

Player Name	Player Birthday	Parent/Guardian Signature	Relationship to Child	Parent Email Address
1 Tucker Bise	5/24/12	Nathan Bise	Dad	tuckerlandry2620@gmail.com
2 Nash Brinkmann	12/24/12	Nathan Brinkmann	Dad	nathan.brinkmann@gmail.com
3 Colton Carver	6/13/12	BSCarver	Dad	BSCarver@gmail.com
4 Brantley Chism	11/9/12	Jyndray Chism	Mom	jchism2010@gmail.com
5 Colton Chism	11/9/12	Jyndray Chism	Mom	" "
6 Braydon Eckart	7/29/12	William Eckart	Mom	volsrh-04@yahoo.com
7 Kade Linker	2/4/13	NK Link	Dad	NKlink1986@gmail.com
8 Beck Latchem	8-31-12	D. Latchem	Dad	devin-latchem@yahoo.com
9 Logan Schanks	9/1/12	Michael Schanks	Dad	michael.schanks@gmail.com
10 Zaden Wild	5-24-13	Nathan Wild	Mom	parker88h@hotmail.com
11 Cason Wolff	128-24	B. Wolff	Dad	BWolff68@yahoo.com
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Team Name: Route 3 Riots 11U

Age Division: 11 U National

Coach Name: Justin Chism

Coach Name: Nathan Bise

Coach Name: John Green

Coach Name:

Player Name	Player Birthday	Parent/Guardian Signature	Relationship to Child	Parent Email Address
1 Henry Vogt	9-2-2014	Kristen Vogt	son	kj.vogt18@gmail.com
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