

2024 League Roster/Walver 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 RELEASEE 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: MOCO TRIBE GRIFFIN

Age Division: 9U

Coach Name: KEVIN GRIFFIN

Coach Name: JASON MOORE

Coach Name: BRANDON KELLEY

Coach Name: DOUG VANBUREN

Player Name	Player Birthday	Parent/Guardian Signature	Relationship to Child	Parent Email Address
1 LEYTON GRIFFIN	1/2/2015	<i>[Signature]</i>	DAD	KGRIF13@HOTMAIL.COM
2 MADDOX MOORE	2/11/2016	<i>[Signature]</i>	DAD	JASONMOORE79@GMAIL.COM
3 FINLEY MOORE	5/10/2014	<i>[Signature]</i>	DAD	JASONMOORE79@GMAIL.COM
4 GUS KELLEY	2/24/2015	<i>[Signature]</i>	DAD	KSCOT79@GMAIL.COM
5 WAYLON CRIDER	12/17/2014	<i>[Signature]</i>	MOM	CRIDER1206@GMAIL.COM
6 OWEN HOPKINS	4/17/2015	<i>[Signature]</i>	MOM	WHITNEYMHOPKINS@GMAIL.COM
7 CAMERON MAY	11/12/2014	<i>[Signature]</i>	DAD	jason.andrew.may@gmail.com
8 MASON SCOTT	6/30/2015	<i>[Signature]</i>	MOM	MEL.MATTINGLY87@GMAIL.COM
9 BECKETT VANBUREN	8/19/2014	<i>[Signature]</i>	DAD	VANBUREN05@HOTMAIL.COM
10 JAX MCBROOM	4/8/2015	<i>[Signature]</i>	DAD	jmcbrx4@gmail.com
11 BLAKE HORRELL	8/24/2014	<i>[Signature]</i>	MOM	Candice H19@hotmail.com
12 HUNTER NIEMANN	10/29/2014	<i>[Signature]</i>	Dad	snieermann76@hotmail.com
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