

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: LEBANON LIGHTNING

Age Division: 9U

Coach Name: Kyle Donovan

Coach Name: Lamar Brown

Coach Name: Gary Johnson Johnston

Coach Name: _____

Player Name	Player Birthday	Parent/Guardian Signature	Relationship to Child	Parent Email Address
1 Michael Donovan	5/14/2014	<i>[Signature]</i>	Father	kdbaseball33@aol.com
2 Jamaar Brown	5/13/2014	<i>[Signature]</i>	Father	lamarbrown111039@gmail.com
3 James Johnston	6/23/14	<i>[Signature]</i>	Father	gkjir1973@gmail.com
4 Braxton Bielong	3-20-2005	<i>[Signature]</i>	Mother	daniellewerner45@outlook.com
5 Joesy Camer-Herrera	7-20-2004	<i>[Signature]</i>	Mother	panielaspadd@icloud.com
6 Steven Shirley	2-4-2015	<i>[Signature]</i>	Father	
7 Kayden Mueller	11-17-2014	<i>[Signature]</i>	Mother	alicia-mueller@yahoo.com
8 Bryce Cook	11/25/2014	<i>[Signature]</i>	Mother	Jaimiebechtoldt@gmail.com
9 Trace Winger	12-6-2014	<i>[Signature]</i>	Father	steelecameronwinger@gmail.com
10 Cooper Fazenbaker	2-20-2015	<i>[Signature]</i>	Mother	ambertimmons@hotmail.com
11 James Trame	5-11-2015	<i>[Signature]</i>	Mother	mckgrado2@hotmail.com
12 Noah Reeser	4-9-15	<i>[Signature]</i>	Mother	mrtreac@yahoo.com

13	Owen Johnson <i>Johnson</i>	8/4/15	<i>Owen Johnson</i>	Father	<i>gkjr1973@gmail.com</i>
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