

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: O'Fallon Athletics

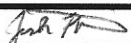
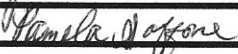


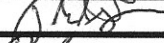
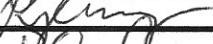

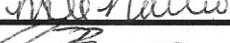
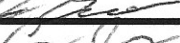
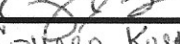


Age Division: 12U

Coach Name: Josh Flint

Coach Name: Alan Jones

Coach Name: Cory James

Coach Name: Jason Brown

Player Name	Player Birthday	Parent/Guardian Signature	Relationship to Child	Parent Email Address
1 Linus Flint	10/25/2011		Father	joshflint1015@gmail.com
2 Orlando Saffore	10/14/2011		Mother	pamela.saffore83@gmail.com
3 Kevin Nelan				
4 Ethan Nelan	10/17/2012		Father	gcfd_medic106@yahoo.com
5 Parker Hemker	9/13/2011		Mother	hparkerca@ezeeweb.com
6 Jonen Jones	6/13/2012		Father	johnathon.jones26@yahoo.com
7 Raymond Winkler	12/2/2011		Father	raymond.winkler@yahoo.com
8 Matthew Fevens	4/12/2012		FATHER	CURT.FEVENS@EMAIL.COM
9 Cameron Tanner	7/27/2012		MOTHER	Ntkellbag8489@gmail.com
10 Parker Brown	1/7/2012		Father	Jason-brown.1@yahoo.com
11 Carter James	3/3/2012		Father	cjcorj@yahoo.com
12 Lane Kuehler	10/14/11		MOTHER	lane012528@icloud.com
13 Greg Ingram	5/14/2011		Father	mjimgrund@yahoo.com
14				
15				
16				
17				
18				
19				
20				

Lano

Greg

Carter