

2024 League Roster/Waiver Form

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

- 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.
 - 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.
 - I will not 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.
 - 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: Southern IL Warriors

Age Division: 13U

Coach Name: Justin Rhodes

Coach Name: Marc Saba

Coach Name: Jim Perrine

Coach Name: Chris Klingeman

Player Name	Player Birthday	Parent/Guardian Signature	Relationship to Child	Parent Email Address
1 Ryder Rhodes	4-22-11	Camille Rhodes	Mother	
2 Kyle Densar	2-09-11	Kim Densar	Mother	mscrui5c79@yahoo.com
3 Steven Klingeman	2-29-12	Callie Klingeman	Mom	cal76sk@yahoo.com
4 Wyatt Gibson	5/24/12	Jimmy Gibson	Dad	jmgibsonespartan1mp.com
5 Elliot Sinn	6/7/10	Christoph M Sinn	Dad	csinn83@gmail.com
6 Colby Saba	10/27/2010	Stefanie Saba	Mom	StefSaba@yahoo.com
7 Joseph Beach	9-10-2010	Genam Mchan	Mom	Genamchan18@gmail.com
8 Brandon Mchan	3-13-13	Genam Mchan	Mom	Genamchan18@gmail.com
9 Jack Mchan	2/24/11	Wally Mchan	Dad	mhsueker@brentwoodmo.org
10 Tanner Chandler	10/19/11	John Chandler	Dad	
11 Andrew Perrine	12/11/10	Lindsay Perrine	Mom	lindsayperrine19@gmail.com
12 Jack Robinson	10/10/12	Shelly Robinson	Mom	
13 Jason Waeltz	5/10/10	Paul Waeltz	Mom	
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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.

Team Name: SI WARRIORS

Age Division: 13U

Coach Name: Justin Rhodes

Coach Name: More Sabo

Coach Name: Jim Perrine

Coach Name: Chris Kingman

Player Name	Player Birthday	Parent/Guardian Signature	Relationship to Child	Parent Email Address
1. <u>Jace Hunter</u>	<u>2-10-2011</u>	<u>[Signature]</u>	<u>son</u>	<u>whitaker03@gmail.com</u>
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