

2025 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: MOCO TRIBE -GRIFFIN

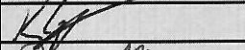
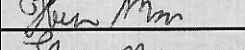
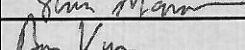
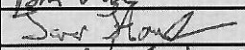
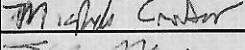
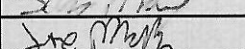
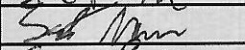
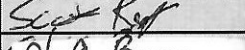

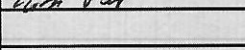
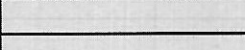
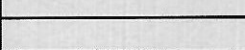
Age Division: 10U

Coach Name: KEVIN GRIFFIN

Coach Name: JASON MOORE

Coach Name: DOUG VANBUREN

Coach Name: JARED HORRELL

Player Name	Player Birthday	Parent/Guardian Signature	Relationship to Child	Parent Email Address
LEYTON GRIFFIN	1/2/2015		DAD	KGRIFF13@HOTMAIL.COM
MADDOX MOORE	2/11/2016		DAD	JASONMOORE79@GMAIL.COM
FINLEY MOORE	5/13/2014		DAD	JASONMOORE79@GMAIL.COM
BECKETT VANBUREN	8/19/2014		DAD	VANBUREN05@HOTMAIL.COM
BLAKE HORRELL	8/24/2014		DAD	JARED@HIWAYMOTOR.COM
WAYLON CRIDER	12/17/2014		MOM	CRIDER1206@GMAIL.COM
CAMERON MAY	11/12/2014		DAD	JASON.ANDREW.MAY@GMAIL.COM
JAX MCBROOM	4/8/2015		DAD	JCMBX4@GMAIL.COM
HUNTER NIEMANN	10/23/2014		DAD	SNIEMANN@HOTMAIL.COM
CARTER RIGGINS	6/5/2015		DAD	RIGGINS.SCOTT@YAHOO.COM
LANDRY BISE	3/20/2015		DAD	TUCKERLANDRY2620@GMAIL.COM
HENRY VOGT	9/2/2014		DAD	KJ.VOGT18@GMAIL.COM
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