

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: TEAM STRIKE ZONE

Age Division: 11U

Coach Name: MARK HEIZER

Coach Name: FERNANDO ROLON

Coach Name: Tomas Pacheco

Coach Name:

Player Name	Player Birthday	Parent/Guardian Signature	Relationship to Child	Parent Email Address
1. Blayne Pacheco	5/25/2013		Father	tomas pacheco86@yahoo.com
2. Cameron Herzog	4/11/2014		Father	monicarherzog@gmail.com
3. Charlie Jackson	10/31/2013			jamielee60s@yahoo.com
4. Christian Rolon	10/27/2013		Father	fernandorolon24@gmail.com
5. CJ Stephens	4/7/2014		Mom	justnat@htc.net justnat@htc.net
6. Elijan Sahrhage	4/11/2014		Father	sahrhage@yahoo.com - Sargerg71@yahoo.com
7. Hoyt Stempel	8/13/2013		Father	gagedog2008@yahoo.com
8. Jack Gass	11/12/2014		Mother	tonyagass@outlook.com
9. Jayce Payne	10/4/2013		Father	ildoss89@gmail.com Rereyade3769@gmail.com
10. Landon Heizer	5/25/2013		Father	markheizer25@gmail.com
11. Lane Tebbe	12/4/2013		Mother	kvonhatten 24@yahoo.com
12. Mason Klucker	5/13/2013		Mother	atk1182@yahoo.com
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