

2025 League Roster/Waiver Form

In consideration of being allowed to participate in any year in the SSBL-regulated baseball tournament, the undersigned acknowledges, understands, 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 will read, 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 advise immediately 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 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 also below.

Team Name: XPLASION 10U - BORON

Age Division: 10U

Coach Name: Joe Baron

Coach Name: Bill Costa

Coach Name: _____

Coach Name: _____

Player Name	Player Birthday	Parent/Guardian Signature	Relationship to Child	Parent Email Address
1. Thomas Bauer	4-17-14		Dad	bauerfam061017@outlook.com
2. Tanner Baron	3-8-14		Mom	Schiffkeja@yahoo.com
3. Braden Mitchell	9-21-13		Dad	mitchellclay00@gmail.com
4. Brady Mitchell	5-24-16		Dad	_____
5. Jose Costa	6-5-13		FATHER	BSCASTG@AOL.COM
6. Bone Fults	1-31-14		MOM	fults.joanna@gmail.com
7. Keegan Hawk	4-11-14		Father	Richard.Hawk@yahoo.com
8. Colton Ruberstell	6-1-13		Father	derekRuberstell@yahoo.com
9. Cameron Jung	5-20-13		Father	jung.gregory@yahoo.com
10. Ethan Schalski	11-19-13		FATHER	_____
11. Vance Hess	11-22-13		Mother	type92001@yahoo.com
12. Maxon Osterberg	4-11-14		DAD	osxentag0912@yahoo.com
13. Jake Greive	2-24-14		DAD	jeff.megan.greive@gmail.com
14. Casan Muendlein	6-6-14		DAD	Cavendlein@gmail.com
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