

## 2025 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:

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 only 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: SI BLUE JAYS 14U (GARCIA)






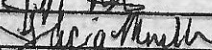


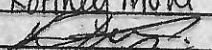





Age Division: 14U

Coach Name: AARON GARCIA (HEAD COACH)

Coach Name: DAN O'HARA (ASST COACH)

Coach Name: DAN NICKS (ASST COACH)

Coach Name: MALISSA O'HARA (SCOREKEEPER/ADMIN)

Player Name	Player Birthday	Parent/Guardian Signature	Relationship to Child	Parent Email Address
1 BRAYDEN O'HARA	11/19/10		FATHER	DAN.OHARA74@gmail.com
2 CAMDEN GARCIA	06/14/2012		Father	agarcia1217@gmail.com
3 SAM BECK	11/29/10		Mother	beckfamily07@gmail.com
4 HUNTER HUFFMAN	02/10/11		FATHER	Brian Huffman 75@yahoo.com
5 JACOB BERCHERER	02/24/11		Father	compau to 324@gmail.com
6 KASH HART	04/07/11		Father	budweiser 67828@yahoo.com
7 KNOX ASHER	10/06/10		Father	jrasher@hotmail.com
8 MASON MUELLER	04/27/11		Mother	triciamm@yahoo.com
9 OWEN KEEFE	10/03/10		Mother	+keefe35@gmail.com
10 JAYDEN WILLIS	11/22/11		Father	adamwillis1989@yahoo.com
11 CARSON MOLL	9/2/10		Mother	CKmoll1@gmail.com
12 BRODY MELTON	10/8/2010		Father	CKn.melton@yahoo.com
13 MICHAEL LUCZAK	09/13/2011		Father	mluczak27@gmail.com
14 Walker Conley	6/23/2011		FATHER	JDconley@hotmail.com
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