



Official ADULT Roster

Dustin Hall  
530-383-0142

Legacy Sports



NOTICE: Each player must personally sign his/her name.

Team Class

Men/Women/COED

City/State

Team Name

Date

**NorCal Softball Roster form player waiver, release of liability/indemnification agreement and sanctioned invitational tournament or league team membership**

HOLD HARMLESS WAIVER OF LIABILITY: I, the undersigned player, acknowledge, agree and understand that: 1. voluntarily and of my own free will, I elect to participate as a member of the softball team and league indicated above. 2. I understand that there are certain risks and hazards involved in participating in softball that may result in injury or death to me or other players, including, but not limited to those hazards associated with weather conditions, playing conditions, equipment and other participants. 3. I understand that sliding in to base is dangerous to me and to other players and may result in serious injury or death. 4. I understand that the very nature of the game of softball is hazardous and risky, including, but not limited to, the acts of pitching, throwing, fielding and catching of the ball, the swinging of the bat, running, jumping, stretching, sliding, diving, and collisions with other players and with stationary objects, all of which can cause serious injury or death to me and to other players. Further, I, the undersigned player, agree that in consideration for the right to play NorCal Softball and be a member of the team designated above and in consideration for permission to play on the fields arranged for by the team or league: 1. I voluntarily elect to accept and assume all risks of injury incurred or suffered by me (a) while practicing or playing as a member of the team so designated, (b) while serving in a non-playing capacity as a team member during practice or play by other teams or by both players on my team, and (c) while on or upon the premises of any and all of the fields arranged for by my team or league for practice or play. 2. I release, discharge and agree not to sue the team, the league, the field owner or other entity associated with the league, NorCal Softball, or their owners, officers, agents, servants, associations, employees, or any person or entity connected with the team, league, field or NorCal Softball for any claim, damages, costs or cause of action which I have or may in the future have as a result of injuries or damages sustained or incurred by me from whatever cause including but not limited to the negligence, breach of contract or wrongful conduct of the parties hereby released.

	Print or Type Player's Name	DOB	Drivers License #	Player Signature
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ALL Participants must be listed on the roster with all information correct and complete. Roster must be personally signed by all players.

TEAM MEMBERS MUST BE ABLE TO PROVIDE A GOVERNMENT ISSUE PHOTO I.D. AT ANY TIME.  
COACH/TEAM MANAGER AFFIDAVIT

I am the coach/manager of the above team and guarantee all of the information supplied above is correct to the best of my knowledge and that all of the players signed the above in their handwriting. The players are eligible to compete with my team in all tournament play.

COACH/MANAGER'S NAME (PRINT)

EMAIL for COACH/MANAGER

COACH/MANAGER'S ADDRESS (PRINT)

CITY, STATE & ZIP

SIGNATURE OF COACH/TEAM MANAGER

Cell #