



NATIONAL SOFTBALL FEDERATION PLAYER WAIVER, RELEASE OF LIABILITY, INDEMNIFICATION AGREEMENT AND OFFICIAL TEAM ROSTER

Year _____

Sports Community (City/State) _____ Division _____

Team Name _____ Class: Open/Major A B C DD D EE E
(see division code box)

Team Manager _____ Phone H () _____ W () _____
(to be eligible as a player, team manager must also be listed under players section)

Address _____ City _____ State _____ Zip _____

Email Address _____

- * TEAM COACH CHECKLIST FOR TOURNAMENT PLAY ***
- Signatures of all players must be on this official tournament roster.
 - All players must have a driver's license I.D., military picture I.D., or company picture I.D.
- All of the above requirements must be met at team check-in and throughout tournament play.**

DIVISION CODE BOX

MSP - Men's Slowpitch	MS55 - Men's (55 + Over) Slowpitch
WSP - Women's Slowpitch	MS60 - Men's (35 + Over) Slowpitch
MISP - Men's Industrial Slowpitch	WS30 - Women's (30 + Over) Slowpitch
MCSP - Men's Church Slowpitch	MFP - Men's Fastpitch
CRSP - Co-Rec Slowpitch 11"/12"	WFP - Women's Fastpitch
CR14 - Co-Rec Slowpitch 12"/14"	MF40 - Men's (40 + Over) Fastpitch
MS35 - Men's (35 + Over) Slowpitch	MF23 - Men's (23 + Under) Fastpitch
MS40 - Men's (40 + Over) Slowpitch	MMP - Men's Modified Pitch
MS45 - Men's (45 + Over) Slowpitch	WMP - Women's Modified Pitch
MS50 - Men's (50 + Over) Slowpitch	MM35 - Men's (35 + Over) Modified Pitch

PLAYER STATEMENT Each player shall read the following statements before signing the roster. I am a member in good standing of the above team and I am eligible under local sports community and NSF eligibility rules to compete with this team in local sports community and NSF tournament play. I understand that I may participate in only one NSF post-season tournament in the same division of play and my signature may appear on only one post-season tournament roster in the same division of play. For the definition of "divisions of play" please see the applicable NSF Guidebook. I agree to abide by the rules and regulations established for local sports community and NSF play.

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 amateur sports team and league indicated above. 2. I understand that there are certain risks and hazards involved in playing 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 the very nature of sports participation is hazardous and risky, including, but not limited to, hitting or catching a ball, blocking, checking, swinging a broom, 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 as a member of the team designated above and in consideration for permission to play on the courts, rinks or 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 facilities arranged for by my team or league for practice or play. 2. I release, discharge and agree not to sue the team and league designated above, the fieldowner or other entity designated above, the National Softball Federation of America, or their owners, officers, agents, servants, associations, employees, or any person or entity connected with the team, league, field or National Softball Federation of America 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 NAME	PLAYER'S SIGNATURE	RESIDENCE ADDRESS	CITY	STATE	ZIP	TELEPHONE	PARENT'S SIGNATURE (MINORS ONLY)	BIRTHDATE		
								M	D	Y
1.										
2.										
3.										
4.										
5.										
6.										
7.										
8.										
9.										
10.										
11.										
12.										
13.										
14.										
15.										
16.										
17.										
18.										
19.										
20.										

Statement of Team Manager and League Director: We hereby verify that each player appearing on this NSF tournament roster qualifies under the eligibility rules outlined in the NSF program guide. We understand that a violation of NSF eligibility rules even if inadvertent, will result in the automatic disqualification of the team and may result in the probation and/or suspension of our sports community from future NSF participation.

Team Manager's Signature

League Director's Signature