

PIONEER SOFTBALL ASSOCIATION

RELEASE FORM OFFICIAL TEAM ROSTER

DATE _____



LEAGUE NIGHT _____

CAPTAIN'S NAME (PRINT) _____

2ND CONTACT NAME (PRINT) _____

CAPTAIN'S SIGNATURE _____

2ND CONTACT SIGNATURE _____

PRIMARY # _____

PRIMARY # _____

SECONDARY # _____

SECONDARY# _____

HOME ADDRESS _____

HOME ADDRESS _____

CITY & ZIP _____

CITY & ZIP _____

EMAIL _____

EMAIL _____

I HEREBY AGREE TO PLAY SOFTBALL FOR _____ AND AGREE TO ALL RULES.
(TEAM NAME)

AS A CONSIDERATION FOR BEING PERMITTED TO UTILIZE THE FACILITIES AT PIONEER BOWL, INC, AND OR USING EQUIPMENT OF PROPERTY OF SAID ORGANIZATION, EACH SUCH PARTICIPANT AND USER AGREES TO ASSUME ALL LIABILITY FOR INJURY AND OR DAMAGE RESULTING FROM SUCH PARTICIPATION OR USE AND FURTHER AGREES TO HOLD PIONEER BOWL, INC., FREE AND HARMLESS ON ANY ACCOUNT OF ANY ACT OF OMISSION OR COMMISSION OR NEGLIGENCE ON THE PART OF PIONEER BOWL, INC., OR ANY OF IT'S OFFICERS.

PLAYER'S NAME (PRINT)	PLAYER'S SIGNATURE	AGE	CITY / TOWN / VILLAGE
1. _____	_____	____	_____
2. _____	_____	____	_____
3. _____	_____	____	_____
4. _____	_____	____	_____
5. _____	_____	____	_____
6. _____	_____	____	_____
7. _____	_____	____	_____
8. _____	_____	____	_____
9. _____	_____	____	_____
10. _____	_____	____	_____
11. _____	_____	____	_____
12. _____	_____	____	_____
13. _____	_____	____	_____
14. _____	_____	____	_____
15. _____	_____	____	_____
16. _____	_____	____	_____
17. _____	_____	____	_____
18. _____	_____	____	_____
19. _____	_____	____	_____
20. _____	_____	____	_____