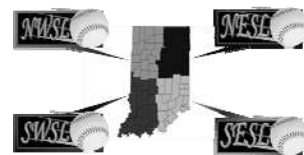




SOFTBALL LEAGUE REGISTRATION/ROSTER

This form needs to be completed and mailed with the entry fee and proof of insurance to the address at the bottom of the form before the deadline stated.



CONTACT INFORMATION: (Please Print) Manager's Name _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone Number: () - Cell Phone Number: () -

Email: _____

PARTICIPANTS AND THEIR PARENT(S) OR GUARDIAN(S) ACKNOWLEDGE BY SIGNING THIS REGISTRATION FORM THAT PROPER CONDUCT TOWARDS PLAYERS, OFFICIALS AND COACHES WILL BE FOLLOWED. IF AT

NSA Sanction # _____

Manager's Signature: _____

Date: _____

I (we) do hereby release, absolve, indemnify, and otherwise hold blameless ON TURF SPORTS LLC, the organizers, sponsors, directors and game officials of any damages, demand's or actions whatsoever, which may arise out of his/her participation in this ON TURF SPORTS LLC activity.

(Please Print)

Team Name: _____

Parent or Guardian's Signature is Required for Each Player.
Signature 1: _____
Signature 2: _____
Signature 3: _____
Signature 4: _____
Signature 5: _____
Signature 6: _____
Signature 7: _____
Signature 8: _____
Signature 9: _____
Signature 10: _____
Signature 11: _____
Signature 12: _____
Signature 13: _____
Signature 14: _____

Name	DOB	Age
Player 1: _____	(/ /) _____	_____
Player 2: _____	(/ /) _____	_____
Player 3: _____	(/ /) _____	_____
Player 4: _____	(/ /) _____	_____
Player 5: _____	(/ /) _____	_____
Player 6: _____	(/ /) _____	_____
Player 7: _____	(/ /) _____	_____
Player 8: _____	(/ /) _____	_____
Player 9: _____	(/ /) _____	_____
Player 10: _____	(/ /) _____	_____
Player 11: _____	(/ /) _____	_____
Player 12: _____	(/ /) _____	_____
Player 13: _____	(/ /) _____	_____
Player 14: _____	(/ /) _____	_____

Please make CHECKS PAYABLE TO: OnTurf Sports LLC

Phone: 941-445-0050 Joel Holloway
Phone: 260-414-3298 Mark Green
E-mail: onturfsports@gmail.com
www.onturfsports.com

Mail Form and Entry Fees To:
426 N. Lafontaine Street
Huntington, IN 46750