



## GPMABL Roster Information

Team Name

Player Name

Address

City

State

Zip Code

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Home Phone Number

Work Phone Number

Alt Phone Number

E-Mail

Occupation

Positions

Age (as of 4/1)

I hereby agree and consent to the following parameters as conditions of participation in the Greater Philadelphia Men's Adult Baseball League (GPMABL):

I will observe all GPMABL rules at all times.

I understand that fighting, physical abuse of players, umpires, or spectators and the use of abusive or offensive language will not be tolerated by the GPMABL and violation of this rule could result in my banishment or suspension from the league and forfeiture of all fees paid.

I certify that my age, as listed above, is correct and true.

I realize that the total responsibility for any injury, accident, incident, illness, or death to me or by my person while participating in any GPMABL activity, game, practice, or function, including, but not limited to any GPMABL-mandated or scheduled functions are solely mine. I fully realize that any costs incurred for any reason are mine.

By signing this agreement, I release the GPMABL from any liabilities or cost. I fully agree that the terms and conditions of this agreement are binding.

Signature

Date

<input type="text"/>	<input type="text"/>
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