



OFFICIAL BASEBALL ROSTER

Is This A Change In Manager From Application? Yes[] No[] Is This An Address or Telephone Change? Yes[] No[]

TEAM: _____ DAY OF LEAGUE: _____ LEAGUE #: _____ MANAGER'S NAME _____
 MANAGER'S ADDRESS: _____ CITY: _____ ZIP CODE: _____ PHONE(_____) _____

SCAN AND EMAIL IS OK
 We do not accept rosters that are faxed in.
Bring/Mail/Email original roster to:
 Valley Municipal Sports Office
 6911 Laurelgrove Ave., N. Hollywood, 91605
 Call Sports Office (818) 765-0284 to confirm receipt!

NOTE: ALL team players must also read and sign the official League waiver printed on the reverse side of this roster. * NOTE: Player/Managers must also sign roster.

Rosters are due in the Sports Office prior to your 3rd league game. Teams with no roster on file will be subject to forfeit if a protest is filed and will not be eligible for any tournaments. Roster will not be accepted after the 8th league game. Use continuation sheet if necessary.

| PLAYER'S NAME (Please Print) | PLAYER'S SIGNATURE | ADDRESS, CITY | ZIP CODE | HOME PHONE | YEAR BORN |
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PLEASE SIGN WAIVER ON REVERSE SIDE OF ROSTER .

ALL TEAM PLAYERS MUST READ THE OFFICIAL LEAGUE WAIVER STATED BELOW AND SIGN.

RELEASE AND WAIVER FORM

All participants are required to assume all risk by signing this general release. I understand that the risks I assume by participating in the Municipal Sports Program include, but are not limited to serious head and other bodily injuries. In consideration of receiving permission to participate in the Municipal Sports Program, I hereby release the City of Los Angeles, and all of its officers and employees from all liability for any personal injury, death or damage of any kind arising from or related to my participation in the Municipal Sports Program. No oral representations, statements or inducements apart from this written waiver have been made. My decision to participate in the Municipal Sports Program is voluntarily assuming all risk or loss, damage, or injury including death that may occur through my participation in the Municipal Sports Program. I understand that by signing this release and waiver, I am giving up the right for myself and/or my family or heirs to sue the City of Los Angeles, and its officers and employees for injuries resulting from participation in the Municipal Sports Program.

I agree to abide by all RULES and REGULATIONS governing Municipal Sports – which includes any disciplinary measures, fines or suspensions levied by the MUNICIPAL SPORTS EXECUTIVE COMMITTEE.

 Name of Team League Number Division

I ACKNOWLEDGE THAT I HAVE READ AND THAT I UNDERSTAND EACH AND EVERY ONE OF THE ABOVE PROVISIONS IN THIS WAIVER, RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT AND AGREE TO ABIDE BY THEM.

| NAME OF PLAYER (Please Print) | SIGNATURE | DATE |
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