Mason Baseball Softball Club, Inc. Official Roster, Waiver and Release of Liability and Indemnification

I hereby give my consent for my child/ward to participate in the Mason Girls Fastpitch Softball League conducted by Mason Baseball Softball Club, Inc. for the year 2024. By participating in this program I will not hold the sponsors, supervisors, coaches, officials or volunteers responsible for any injury my child/ward may sustain while participating in the program. I understand there is an inherent risk of injury by participating in the program and I voluntarily assume the risk of such potential injury. I also understand that this program does not provide any medical insurance for participants.

Team Name:					
Player's Name	Legal Residence (Street, City)	Date of Birth	Parent/Guardian Signature	Date	
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
Number of travel team p	layers: Indicat	te Travel players with an *			
Coaches signature: Co		Community Coordinator Sign	nmunity Coordinator Signature:		

By affixing your signature you certify that all of the information contained on the form is correct.

Scan and email to MBSCSoftball@yahoo.com or USPS mail to MGFSL Coordinator 234 Mark Street Mason, MI 48854 by May 31, 2024.

Failure to submit this roster will prohibit the team from participating in the regular season as well as the end of season tournament.