

SPORTSNATION/BaseballNation Official ROSTER

www.sportsnation.org www.baseball-nation.com

210 Huddersfield Drive Richmond, VA 23236 (804) 378-2285

(Fill out this roster and present to each tournament director. This roster must match your online list of players)

Team Name _____

Age Group _____

City/ State _____

Class: A or B or Both _____

Online Order Number (REQUIRED) _____

Assigned Area Director (If you know) _____

Date _____

ALL TEAM MANAGERS AND PLAYERS MUST READ THE FOLLOWING STATEMENT BEFORE COMPLETING AND SIGNING

In consideration of being permitted to participate as a member team with Sportsnation.org, I hereby agree for myself, successor, heirs and assigns, release and forever discharge Sportsnation.org, and Baseball-Nation, their employees, officers, and directors from all claims, actions or judgements I may have or claim to have against Sportsnation.org/Softballnation for all personal injuries, including death, and injuries to property, real or personal, caused by or arising out of my participation with Sportsnation/Baseball-Nation, - either Leagues or Tournaments. I further agree for myself, successor, heirs and assigns to indemnify and hold Sportsnation/Baseball-Nation harmless from all claims and suits for personal injuries, including death, damages to property caused by my act of omission arising out of participation with Sportsnation/Baseball-Nation and from all judgements recovered and from all expenses incurred in defending said claims or suits. I further agree that my photographs, pictures, slides or movies taken or made by Sportsnation/Baseball-Nation, their employees, officers and directors, in connection with my participation with Sportsnation/Baseball-Nation either leagues or tournaments, or any reproduction of the same, as well as my name, may in any manner be used by Sportsnation/Baseball-Nation, or by any person, corporation or association authorized by Sportsnation/Baseball-Nation. I am in good health and have no physical condition that would prevent me from participating in Sportsnation/Baseball-Nation events.

I, THE UNDERSIGNED, HAVE READ AND UNDERSTAND THE FOREGOING RELEASE.

	Print or Type Player's Name First, Middle, Last	Parent/Guardian's Signature Please Indicate Relationship: (M)other, (F)ather, etc.	Street Address, City, State	Zip	Date-of-Birth: mm/dd/yyyy	Phone:
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Sportsnation/Baseball-Nation Requirements: Roster must be signed by a parent/guardian. A player is automatically ineligible if a signature appears on more than one roster, unless the player has a written release dated and signed by the team manager of the team by which the player is being released. The release must be filed with the Assigned Director before the team plays in a tournament and the release must meet all Sportsnation/Baseball-Nation player eligibility guidelines. I am the manager of the above team and guarantee all of the information supplied above is correct to the best of my knowledge and that all of the players signed the above in their handwriting and they are eligible to compete with my team in Sportsnation/Baseball-Nation leagues/Tournaments. I agree that my team is bound by the rules and regulations of Sportsnation/Baseball-Nation.

Manager's Name:	_____	Manager's Signature	_____	Manager's Phone:	_____
Manager's Address:	_____				
Team Insurance Carrier	_____	Insurance Certificate Number	_____		