

# Ball Yard HitTrax Youth Hitting League

## *Roster Form*

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**Team Roster (3-5 players per team)**

**Team Name** \_\_\_\_\_ **Age Group** \_\_\_\_\_ **Baseball** **Softball**

**Team Contact Name** \_\_\_\_\_ **Phone** (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ **Email-** \_\_\_\_\_

By signing this roster the participant (or Parent or Legal Guardian for Minors under 18 years old) agree to The Ball Yard RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AND PARENTAL CONSENT AGREEMENT. A copy can be found at [www.fmballyard.com](http://www.fmballyard.com) under Leagues.

Name	Date of Birth	Phone	Email	Parent/Guardian Signature
1. _____	____/____/____	_____	_____	_____
2. _____	____/____/____	_____	_____	_____
3. _____	____/____/____	_____	_____	_____
4. _____	____/____/____	_____	_____	_____
5. _____	____/____/____	_____	_____	_____

*Please email [mike@fmballyard.com](mailto:mike@fmballyard.com) with this roster so player names can be entered into the HitTrax computer 1 week in advance.*