



Boston West Coed Softball League

Team Name: _____

Captain: _____

Date: _____

TEAM ROSTER

Waiver and Certification Statement

I hereby acknowledge that there are inherent risks participating in any sport, including softball, and I agree to assume the risk of any injury or damage resulting from my participation in the Boston West Coed Softball League. I further agree to hold harmless the Boston West Coed Softball League, its representatives, and agents from any liability resulting from my participation in the above-named softball league. In summary, I agree to assume all the responsibilities and risks with my participation in the Boston West Coed Softball League.

	Print Name	Signature	Telephone #
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			
21.			
22.			
23.			
24.			
25.			
26.			
27.			
28.			
29.			
30.			