

**ABA SPORTS - 2018 OFFICIAL SOFTBALL TEAM ROSTER FORM**

ADDRESS: ABA Sports, 1 Ames Court, Suite 100, Plainview, NY 11803  
 FAX: 516-870-0041  
 EMAIL: [leagueoffice@abasports.com](mailto:leagueoffice@abasports.com) WEBSITE: [www.abasports.com](http://www.abasports.com)

**TEAM NAME**

- All Captains & Team Players MUST COMPLETE & SIGN BOTH THE ROSTER AND WAIVER FORMS prior to participation. Please complete your Online Roster as well.
- Managers must SUBMIT THIS FORM to the league office before the deadline. PLEASE PRINT CLEARLY & COMPLETE ALL INFO REQUESTED!

	PLAYERS NAME	STREET ADDRESS	CITY	ZIP CODE	HOME PHONE	EMAIL
1	Manager:				( )	
2					( )	
3					( )	
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16					( )	
17					( )	
18					( )	
19					( )	
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**YOU MUST FULLY COMPLETE THIS FORM AND THE LIABILITY RELEASE WAIVER ON THE REVERSE SIDE!**



<hr/> Team Name <hr/>
<hr/> Manager Name <hr/>

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**AMATEUR ATHLETIC WAIVER AND RELEASE OF LIABILITY & MODEL RELEASE FORM**

In consideration of being allowed to participate in any way in the ABA SPORTS Inc. athletic/sports program, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from the activities involved in the program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If however I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS ABA SPORTS Inc., THE UNITED STATES SPECIALTY SPORTS ASSOCIATION, their officers, officials, agents and / or employees, other participants sponsoring agencies, sponsors, advertisers, and, if applicable, (owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE; and,
5. I willingly agree to comply with all rules and regulations as stated in the ABA SPORTS Inc., UNITED STATES SPECIALTY SPORTS ASSOCIATION rule book or the AMATEUR SOFTBALL ASSOCIATION RULEBOOK; if applicable
6. I understand that personal injury and liability insurance is not included in the league fee; and,
7. I, do hereby give ABA Sports, Inc., their assigns, licensees and legal representatives the irrevocable right to use of my picture or photograph in all forms and media and in all manners, for advertising, trade, or any other lawful purposes, and I waive any right to inspect or approve the finished product, including written copy, that may be created in connection therewith; and,

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

**PARTICIPANT SIGNATURE**

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**YOU MUST FULLY COMPLETE THIS FORM AND THE ROSTER FORM ON THE REVERSE SIDE!**