



## QUALITY SPORTS AUTHORITY ADULT SOFTBALL ROSTER

**By signing this official roster each individual will assume all risks and hazards that are incidental to the conduct of the activities. I further agree to release, absolve, indemnify and hold harmless, Quality Sports Authority League, their sponsors, organizers, supervisors, officers, and field owners, of all legal responsibilities.**

\_\_\_\_\_  
TEAM NAME                                      LEAGUE                                      SPORT

\_\_\_\_\_  
TEAM MANAGER                      ADDRESS                                      \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
HM PHONE      WK PHONE      FAX

NAME (PRINT)	SIGNATURE	ADDRESS	HM PH#	WK PH#	AGE
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					