Form is available for download here (PDF, 84k)

ISSA/ISF OFFICAL ROSTER RB Thomas, Jr. ISSA

Executive Director 9401 East Street

(703)368-1188 Manassas, Virginia 20110-5414 Date

Team Name Age and Rating City and State

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

In consideration for being permitted to participate in ISF and/or ISSA senior tournaments, I hereby agree for myself, successors, heirs, and assigns, to release and forever discharge the International Softball Federation (ISF) and the International Senior Softball Association, Inc. (ISSA), their employees, officers, directors, and volunteers from all claims, actions, or judgments I may have or claim to have against the ISF and ISSA for all personal injuries, including death, and injuries to property, real or personal, caused by or arising out of my participation in the ISF and/or ISSA tournament. I further agree to indemnify and hold ISF/ISSA harmless from all claims and suits for personal injuries, including death, damages to property caused by my act of omission arising out of participation in the ISF/ISSA tournament and from all judgments recovered and from all expenses incurred in defending said claims or suits. I further agree to voluntarily assume any and all risks inherent to participation and agree

to abide by all rules and regulations established for the ISF and/or ISSA tournament. I further agree that my photographs, pictures, slides, or movies taken or made by the ISSA, their employees, officers and directors, in connection with my participation in the ISF/ISSA tournament or any reproduction of the same, as well as my name, may in any manner be used by the ISF/ISSA, or by any person, corporation or association authorized by ISF/ISSA. Fighting, drunk and disorderly conduct and disobeying park rules should be cause for dismissal from the park. I am in good health and have no physical condition that would prevent me from participating in the ISF/ISSA tournament. I the undersigned have read and understand the foregoing release.

PLAYERS - PRINT INFORMATION AND AFFIX SIGNATURE

PRINT NAME

ADDRESS, CITY,SATATE, ZIP

DATE OF BIRTH

SIGNATURE

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Manager's Affidavit: To the best of my knowledge, I guarantee the above players signed the roster in my presence and the information is factual. We further agree to play and abide by the ISSA/ISF rules and policies. All rosters must be signed by the player .

Manager's Name Manager's Signature
Address, City, State, Zip

Team Name Contact Number Team Email
Address(REQUIRED)

Roster submitted for this Tournament (mark only one)

April's Finest
18 th Annual Master's Classic

ISF Senior World Cup

Mountianeer Classic
ISSA World Championships
ISSA Winter National