



LEAGUE ROSTER
 March 2018- July 2018

Age Division: _____

Team Name: _____

	Print Player Name	Address	Zip	Phone	Birthdate	Parent/Guardian	Email
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							

Parent/ Guardian signature on this form indicates their agreement to hold harmless the City of Lake Saint Louis and its representatives from any claims for damages and/or injuries sustained by them or any person or property happening by reason of participation in or spectator at the activities of the Baseball/Softball Program.

Manager: _____

Coach: _____

Coach: _____