

Adult Wood Bat Baseball Team Roster



All information must be neatly printed or types. Please read roster carefully. Your signature is acknowledgement and agreement of the waiver below.

Team: _____ Manager: _____

Cell Phone: _____ Email: _____

Mailing Address: _____ City: _____ Zip: _____

Special Note:

- Beverly Hills residents, business employees, and BHHS graduates must check the appropriate box below (Res, Bus, Grad).

	Player's Name	Address (City/Zip)	Cell Phone Number	Res	Bus	Grad	Signature
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I acknowledge use of this sport facility requires courtesy towards its residential neighbors and I will refrain from littering and excessive noise and abide by street parking restrictions. As participants in the Beverly Hills Adult Sports Leagues, we hereby acknowledge that our signature releases and discharges the City of Beverly Hills and all of its officers, agents, and employees from any and all liability for claims, injuries, or damage to person or property. As a team representative, I hereby certify that all of the above information is correct and in no way falsified.

Signature of Manager: _____ Date: _____

Beverly Hills Community Services Department