

City of Marietta  
Public Facilities Department  
304 Putnam Street  
Marietta, Ohio 45750  
Phone: (740) 373-1616  
Fax:

**Softball Roster / Waiver Form**

Rosters must be submitted to the City of Marietta Public Facilities Department prior to the first game!

**Summer League:** Men's \_\_\_\_\_ CoEd \_\_\_\_\_ Church \_\_\_\_\_ Old-Timers \_\_\_\_\_ Men's Weekend \_\_\_\_\_

**Spring League:** Men's \_\_\_\_\_ **Fall League:** CoEd \_\_\_\_\_ Men's \_\_\_\_\_

**Team Name:** \_\_\_\_\_

**Manager Name:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **ZIP Code:** \_\_\_\_\_

**It is the Team Manager's responsibility to make players aware of all league information, and also to inform all players listed below that by placing their name on the roster below, they understand and agree with the following release statement:**

I agree and understand that in consideration for being permitted to participate in this City of Marietta sports program, I do hereby for myself, my heirs, executors & administrators release the City of Marietta, the Marietta Recreation Commission, Marietta Softball Association, their employees, agents, officers, representatives, and volunteers, from all claims or demands resulting from any and all injuries sustained while participating in or attending games, practices, or events as part of this City of Marietta sports program. I further agree to abide by the rules and regulations of the Marietta Softball Association and the City of Marietta Public Facilities Department. I do hereby give permission for the City of Marietta Public Facilities Department, the Marietta Recreation Commission, the Marietta Softball Association, their employees, agents, officers, representatives, and volunteers to use photographic images and/or video footage for promotional items (web site, newsletters, flyers, etc.)

\_\_\_\_\_  
**Signature of Manager\*** **Date**

\*--roster will not be accepted without Team Manager signature

**Please provide your team roster (EACH PLAYER MUST SIGN THIS ROSTER):**  
**Any additions or revisions to this roster once submitted must be approved by the officers of your league.**  
**A maximum of 20 players may be included on your roster.**

- |           |           |
|-----------|-----------|
| 1. _____  | 11. _____ |
| 2. _____  | 12. _____ |
| 3. _____  | 13. _____ |
| 4. _____  | 14. _____ |
| 5. _____  | 15. _____ |
| 6. _____  | 16. _____ |
| 7. _____  | 17. _____ |
| 8. _____  | 18. _____ |
| 9. _____  | 19. _____ |
| 10. _____ | 20. _____ |

**Each players eligibility has been checked and is in compliance with the guidelines of this program.**  
**EACH PLAYER IS REQUIRED TO HAVE A PICTURE I.D. AT EVERY GAME.**

**No alcoholic beverages will be permitted. Any player who violates this rule will be suspended from all softball leagues within the jurisdiction of the Marietta Softball Association for one year. Additionally, the suspended player's team will be subject to removal from the league with no refund of entry fees.**