2010 City of Hollister SOFTBALL TOURNAMENT-ROSTER

Please accept this entry roster for City of Hollister Softball Tournament. Entry fee is enclosed, check made to "**City of Hollister**". In consideration of accepting my entry in the softball tournament, I hereby, for myself, my heirs, executors, administrators and assignees, waive all rights and claims for damage against the organization, this event, its agents, representatives, successors, and assignees for any and all injuries suffered by me during said event.

Team Name _____ Division _____

Team Manager _____ Contact #_____

Email _____ Fax _____

Name	**Address (include zip code)**	**Phone**	**Signature**
Mgr.			
Asst.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			

I, the undersigned Team Manager, declare this team meets all rules and regulations set forth by the City of Hollister.

Signature of Team Manager: _____

Your Recreation Department Official must complete the following:

Name of City: _____ League: _____ League Standing _____

I certify that all players qualify under Nor-Cal ASA team placement guidelines.

_____Date: _____

Signature-Recreation Department Official Print Name

NOTE: This roster along with a check or money order can be returned to Tina Garza, City of Hollister/Nor-Cal ASA Tournament Director-300 West Street, Hollister, CA 95023. Entry fee is payable to "City of Hollister".