NORWALK REC ADULT SOFTBALL ROSTER

LEAGUE _____ **CAPTAIN NAME** _____

TEAM NAME _____ **PHONE** _____

FACEBOOK REP. (See Below) _____ **EMAIL** _____

PRINT NAME	SIGN NAME *(PARENTS SIGN IF UNDER 18)*	PHONE	STREET ADDRESS	CITY

PLAYERS

By signing above you hereby release the Park & Rec Dept., City of Norwalk and all others from any and all liabilities incurred during competition or practice. You personally assume all responsility as a result of being permitted to participate in this program.

NORWALK OHIO SOFTBALL FACEBOOK

Communication regarding rainouts, makeups, schedules, tournaments, etc. is predominately done via the Norwalk Ohio Softball Facebook group. Please list a team representative above that can be tagged if different than your team captain.

CAPTAIN

By signing this roster, I am stating that the above addresses are correct and that the above are legal participants.

Signature:_____

Sponsor Fee Receipt # _____

Team Player Fee Receipt # _____