



## QUALITY SPORTS AUTHORITY ROSTER

**By signing this official roster each individual will assume all risks and hazards that are incidental to the conduct of the activities. I further agree to release, absolve, indemnify and hold harmless, Quality Sports Authority League, their sponsors, organizers, supervisors, officers, and field owners, of all legal responsibilities.**

\_\_\_\_\_ LEAGUE \_\_\_\_\_ SPORT \_\_\_\_\_  
 TEAM NAME

\_\_\_\_\_ ADDRESS \_\_\_\_\_ HM PHONE / WK PHONE / FAX  
 TEAM MANAGER

NAME (PRINT)	SIGNATURE	ADDRESS	HM PH#	WK PH#	AGE
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