TEAM ROSTER

CHILHOWEE BAPTIST RECREATION

All undersigned attend church regularly at _____

Team Name (Women's /Men's A-D)_____

Pastor's signature _____
Coach's signature _____
Umpire's signature _____

In order that I may participate in the Chilhowee Baptist Associational Recreation Conference, I do hereby agree to abide by all the rules and regulations set forth by the Associational Recreation Committee. I realize the importance of demonstrating a proper conduct and behavior while participating and agree to abide by the rules. Furthermore, I understand that my failure to abide by the rules will mean termination of by contract and expulsion from future play in the league. I also release the Chilhowee Baptist Association and the church from all responsibility of any injury I might receive while playing.

NOTE: Youth and Children (13-18) must give year, month, day of birth. These will be checked before season starts.