



## OFFICIAL GSA YOUTH ROSTER

Team Name \_\_\_\_\_ City/ State \_\_\_\_\_ Date \_\_\_\_\_

Sport \_\_\_\_\_ Age Group \_\_\_\_\_ Sanction Number \_\_\_\_\_

**ALL TEAM MANAGERS AND PLAYERS MUST READ THE FOLLOWING STATEMENT BEFORE COMPLETING AND SIGNING**

In consideration of being permitted to participate as a member team with GSA. I hereby agree for myself, successor, heirs and assigns, release and forever discharge Global Sports Authority (GSA), their employees, officers, and directors from all claims, actions or judgments I may have or claim to have against GSA for all personal injuries, including death, and injuries to property, real or personal, caused by or arising out of my participation with GSA, Leagues or Tournaments. I further agree for myself, successor, heirs and assigns to indemnify and hold GSA harmless from all claims and suits for personal injuries, including death, damages to property caused by my act of omission arising out of participation with GSA and from all judgments recovered and from all expenses incurred in defending said claims or suits. I further agree that my photographs, pictures, slides or movies taken or made by GSA, their employees, officers and directors, in connection with my participation with GSA either leagues or tournaments, or any reproduction of the same, as well as my name, may in any manner be used by GSA, or by any person, corporation or association authorized by GSA. I am in good health and have no physical condition that would prevent me from participating in GSA events.

**I, THE UNDERSIGNED, HAVE READ AND UNDERSTAND THE FOREGOING RELEASE.**

	Print or Type Player's Name	Parent or Guardians Signature	E-Mail Address	Birth date
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**GSA Requirements:** Roster must be signed by all parents or guardians. I am the manager of the above team and guarantee all of the information supplied above is correct to the best of my knowledge and that all of the parents or guardians signed the above in their handwriting and they are eligible to compete with my team in GSA leagues/tournaments. I agree that my team is bound by the rules and regulations of GSA.  
**COACHES MAY BE ASKED TO PROVIDE BIRTH CERTIFICATES UPON REQUEST. SO PLEASE BE SURE YOU HAVE THEM WITH YOU.**

Coach's Name	Coach's E-Mail Address	Coach's Phone	Coach's Signature
Directors Signature -			State -