



Tournament Roster

A completed roster with each player's name must accompany entry & payment. **Players *MUST* sign the roster prior to the start of their first game.**

Tournament Release & Waiver

In consideration of the Application's acceptance, I hereby, for myself, my heirs, executors and assigns release and waive any and all claims for damages against Cactus Cities Softball League, Saguaro Cup Festival and Arizona Gay Volleyball Association, and/or players, participants, coaches, officials and sponsors, for any and all injuries, or death, or property damages or theft sustained by me as a team participant or spectator. I attest and verify that I am physically fit and sufficiently trained in said activity. I am at least 18 years of age.

Team Name: _____ City: _____ State: _____

#	Name (Print Please)	Signature	Date	DOB	Initial (at check-in)
1					
2					
3					
4					
5					
6					

As team captain, I verify that all players participating on behalf of _____ are properly registered in the
Team name

Saguaro Cup Sports Festival and each have individually signed the above Tournament Release & Waiver. I understand that the failure of any one player to do so, prior to the start of the team's first game, may result in forfeit of the game or suspension of the player(s) from the tournament.

Team Captain: (Print) _____ (Sign) _____ Date: _____