

23rd Annual
Canadian Airlines Softball Classic
October 17-20th, 2011
Honolulu, Hawaii

ROSTER AND WAIVER FORM

Team Name: _____ Airline(s): _____
(Print) (Print)

In consideration of your accepting our entry into the Annual "Hawaiian" Canadian Airlines Softball Classic, I, we, do hereby, for myself, my heirs, executors, administrators and assignees, waive and release any and all rights and claims for damages against the organization, directors, agents and representatives of this tournament, for any and all injuries suffered by me and any team member and family.

We also acknowledge our responsibility in paying for all damages and fees charged against our team.

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

<u>Print Name</u>	<u>Signature</u>	<u>Employee #</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____
11. _____	_____	_____
12. _____	_____	_____
13. _____	_____	_____
14. _____	_____	_____
15. _____	_____	_____

