



Cabin Fever  
Co-Ed Softball Tournament  
**Saturday, Feb. 4<sup>th</sup>, 2012**  
**10:00am McElroy Softball Complex**  
**Registration Form**

Deadline: Tuesday Jan. 31st 4:30pm

Team Name: \_\_\_\_\_  
Manager's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Work #: \_\_\_\_\_ Fax/email: \_\_\_\_\_  
[www.jamestownparksandrec.com](http://www.jamestownparksandrec.com)

Fee: \$60.00 per team

Waiver: By signing this roster I for myself and for my teammates as well as any person or persons associated with myself or my teammates, waive and release the Jamestown Parks & Recreation Dept. from any claims myself or my teammates might have against Jamestown Parks & Recreation Dept. from illness, injury, and damages as a result of our participation in this tournament.

*I have read the waiver and have informed my teammates of this waiver.*

Manager's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Player's (please write legible)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_
11. \_\_\_\_\_
12. \_\_\_\_\_

Please return to:  
Jamestown Parks & Recreation  
1002 2<sup>nd</sup> Ave. SE or PO Box 2014  
Jamestown, ND 58402  
(With registration fee)