

Team Roster with Liability Forms

✓ Checklist

Team Name: _____

Coach's Name: _____

Team Roster

Player's Name	Liability Received Yes/No (Circle One)
1.	Yes/No
2.	Yes/No
3.	Yes/No
4.	Yes/No
5.	Yes/No
6.	Yes/No
7.	Yes/No
8.	Yes/No
9.	Yes/No
10.	Yes/No
11.	Yes/No
12.	Yes/No
13.	Yes/No
14.	Yes/No
15.	Yes/No

Please return to Pierce Township as soon as updated
at 950 Locust Corner Rd. Cincinnati, OH 45245