



**CHESAPEAKE MSBL
REGIONAL TOURNAMENT TEAM ROSTER FORM**

TEAM NAME:

| | PLAYER NAME | ADDRESS (PLEASE PRINT) | SIGNED WAIVER ATTACHED | AGE | REGULAR SEASON TEAM NAME |
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I hereby certify that the above roster is completed accurately, and is true, and correct, and that all the above listed players have played the minimum number of MSBL/MABL regular season games, as stipulated in MSBL/MABL National Rules section 9.d. Any discrepancy to the above stated information shall result in team forfeiture and player expulsion with no refunds.

MANAGER

LEAGUE PRESIDENT

MINIMUM 14 PLAYER ROSTER REQUIRED

Chesapeake Men's Senior Baseball League
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