

JUST HOOP'N BASKETBALL PARTICIPANT RELEASE AGREEMENT

Team Name

BOTH team participant (UNDERSIGNED) must read carefully, initial on lines following each paragraph and sign at the bottom.

Notice:

Undersigned is fully aware that basketball (ACTIVITY) as taught and sponsored by JUST HOOP'N BASKETBALL (ORGANIZATION) is a contact sport and that participating in among other events, practices, games, tournaments and camps for this sport will be a dangerous activity involving a great risk of injury. Activity also includes non-basketball related events.

Risks Assumed:

Undersigned understands that the dangers and risks of learning, competing in or practicing for the activity include, but are not limited to, death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to virtually all internal organs, serious injury to all bones, joints, ligaments, muscles, tendons and other parts of the muscular skeletal system, and serious injury or impairment to other parts of the body, general health and well being. Undersigned understands that the dangers and risks of contests or practicing for the activity may result not only in serious injury, but in a serious impairment of my future abilities to earn a living, to engage in other business, social and recreational activities, and generally to enjoy life. Undersigned understands that he or she assumes risk of injury by participating in Organizations program. _____

Hold Harmless:

In consideration or permitting Undersigned to take instruction and to engage in all activities related to he Organization's program, including but not limited to trying out, practicing, or competing, Undersigned hereby assumes all the risks associated with such activities and agree to hold harmless the Organization and Just Hoop'n Basketball, their employees, agents, representatives, coaches and volunteers from any and all liability, actions, cause of action, debts, claims, or demands of any kind and nature whatsoever which may arise by or in connection with my participation in the Organization's program. _____

Release of Liability:

The terms hereof shall serve as a release of liability and assumption of risk on the part of the Undersigned and his or her heirs, executor, administrator, assignees, and for all members of my family. Undersigned agree that neither the Organization, nor the employees or volunteers of said Organization shall in any way be held liable for any accident or injury in any way received on account of, or while engaged in, or traveling to or from, any activity sponsored by said Organization. Undersigned further agree that neither the aforementioned Organization nor any of its employees, volunteers or students shall be responsible for the payment of any bills rendered for medical services as a result of such accidents or injuries. _____

Health Statement:

Undersigned verifies that participants on team are in good health and are able to participate in the activity described above.
_____ (head coach print name)

Name of Team

Signature Team Head Coach

Date

E mail

Phone () _____ - _____

Address

Zip Code