

Youth Basketball League

2019 Fall Season

Season Begins: Mid September

Grades K-10

Registration Fee: \$100 per child

Child's Name: _____ Grade: _____

Gender: _____ Birth date: _____ Years Experience: _____

Address: _____

City: _____ Zip: _____

Phone Number: _____ Email: _____

Parent Contact Name: _____ Child Shirt Size: _____ (youth / adult)

Do you know anyone interested in coaching?

Name: _____ Phone: _____ Shirt Size _____

Do you know anyone interested in sponsoring a team?

Name/Business: _____ Phone: _____ Email: _____

Coach or teammate Request (Not guaranteed or done via verbal request)

I, _____ for myself, my heirs and personal representatives, here by assume all liabilities, risks, injuries and hazards

Print Name

incidental to, or as a result of, participation in Fitness Center/ I acknowledge the fact that his/these program(s) may have, and/or do involve, physical contact or other conditions or factual circumstances where physical or other injuries may occur. I do hereby waive, release and agree to indemnify and hold harmless the City of St. Pete Beach, its officers, agents ,employees, the organizers, sponsors, activity supervisors, co-sponsoring organizations and participants for any claim, demand, liability, costs, suits, charges or compensation for loss or injury of any kind arising out of a loss or an injury, including losses or injuries arising from the negligence of the City of St. Pete Beach, its agents or employees and sponsors or activity supervisors, arising from my participation in the said activity. I assume all risk of injury, liability, and loss arising from my participation or presence at said activity. I acknowledge that the City of St. Pete Beach, will not assume any costs relating to any injury while I am involved in this activity. This Waiver, Release and Hold harmless/Indemnification Agreement is inconsideration of the City of St. Pete Beach, or activity sponsor permitting my participation in the activity or program at issue and in further consideration of the City of St. Pete Beach ,not requiring self-funded liability insurance coverage on my part as a condition precedent to my participation in the activity. I, freely and voluntarily assume all risk of loss or injury arising from my participation in the activity whether due to my negligence, or the negligence or intentional acts of others. I acknowledge that, absent this Release and indemnification, the City of St. Pete Beach, or other sponsors of the activity would not have offered me, the access to the activity because of unacceptable exposure to civil liability claims, or the expense of providing a program that is risk-free. I have read and understood this document and sign it freely and knowingly, intending that it shall be fully operative and effective in all respects and that it waives legal rights to which I might otherwise be entitled if I am hurt or suffer loss during my participation in that activity.

YOU MUST CAREFULLY READ THIS DOCUMENT BEFORE SIGNING IT. YOU ARE WAIVING OR RELEASING VALUABLE LEGAL RIGHTS. YOU ARE ADVISED TO SEEK THE ADVICE OF AN ATTORNEY IF YOU DO NOT FULLY UNDERSTAND THIS DOCUMENT.

X _____

Signature of Parent or Guardian