



PARTICIPANT INFORMATION:

Name: _____ Date of Birth _____
 _ LAST FIRST Age : _____

I wish to participate in the following camp(s):

	<u>Total Paid</u>
<input type="checkbox"/> Girls Camp — October 2,3,9,10,16,17,23,24—Time—6:00-7:00 T-Shirt Sizing: Youth XS S M L XL Adult XS S M L XL	\$50 _____
<input type="checkbox"/> Boys Camp — October 2,3,9,10,16,17,23,24—Time— 7:00—8:00 T-Shirt Sizing: Youth XS S M L XL Adult XS S M L XL	\$50 _____

MEDICAL ISSUES:

CONTACT INFO / PARENT / GUARDIAN

Full Name: _____ Phone Number: _____

Full Mailing Address: _____ Email Address: _____

EMERGENCY CONTACT:

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

MILE OF GOLD BASKETBALL CLUB (KL SWAMPDONKEYS) WAIVER AND RELEASE OF LIABILITY

In considering of being allowed to participate in any way in the KL SWAMPDONKEYS HOUSE LEAGUE program and related events and activities, the undersigned appreciates and agrees that:

1. The risk of injury from the activities involved in this program is significant, and while particular rules, equipment, and personal discipline may reduce this, it does exist, and,
2. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of MILE OF GOLD BASKETBALL CLUB referees, volunteers, coaches, other players or participants, sponsors, advertisers, and if applicable, owners and lessors or premises used to conduct the programs and any related events and or activities , and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any usual significant hazard during participation, I will remove myself from participation and bring such to the attention of the nearest official immediately, and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release and hold harmless the releases, with respect to disability, or loss or damage to person or property, whether caused by the negligence of the releases or otherwise.
5. I further agree to irrevocably grant MILE OF GOLD BASKETBALL, and KL SWAMPDONKEYS, the perpetual unlimited free rights to record, reproduce, broadcast, exhibit, publish, sell, distribute or use in any way whatsoever, my name and likeness in any media, in connection with my attendance and participation in the KL SWAMPDONKEYS HOUSE LEAGUE program, including without limitation a videotape performance. I agree that I shall have no claim, title, or interest in my attendance or participation or any materials produced hereunder.

FOR PARTICIPANTS OF MINORITY AGE (Under the age of 18 at time of registration) This is to certify that I, as a parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided by Releases, and, for myself, my heirs, assigns and next of kin, I have read this waiver and release of liability, fully understand its terms and indemnify the Releases from any and all liabilities to my minor child's involvement or participation in the programs provided above.

PARENT'S/GUARDIAN'S SIGNATURE _____ DATE _____