



PORTAGE BOYS HOOPS CLUB • YOUTH BASKETBALL

Player Consent and Waiver Responsibility Form

For: Activities – Leagues, Tournaments, Camps, Practices

October 2019 – April 2020

Please submit this completed enrollment and waiver form with your respective youth basketball fee on or before grade level registration deadline. No player will be allowed to participate without first completing this form.

“It is agreed that all risks attendant to watching and/or participating in activities, including, but not limited to bodily injury, are assumed by the participant and his parents and/or legal guardian and that this assumption is acknowledged, approved, and agreed to by said student and his parents and/or legal guardian as indicated by their signature herto.

I hereby certify that the named participant is physically able to participate in the activities and that I knowledge of no physical impairments, which would in any manner limit his/her participation in such a program.

I hereby grant permission for physicians and their designees to administer outpatient medical, surgical, or dental services, to administer appropriate of necessary antigens or other injections, to perform emergency procedures as necessary or to refer to duly licensed medical personnel when indicated, including transfer to hospital.”

Player's Name: _____ Grade in Fall 2019: _____

Street Address: _____ Apt: _____

City / Zip: _____ Phone: _____

Email Address: _____

Alternate Emergency Contact Name: _____

Alternate Emergency Phone Number: _____

**Parent/Guardian Signature: _____ Date: _____

~The “Emergency Medical Authorization Form” must also be submitted with this form~