



OVBA Player Registration Form

Player Information

| | |
|---|-----------------|
| Name: | Phone: |
| DOB: | Sex (M or F): |
| Current Grade: | Current School: |
| Address: | City: |
| State/Province: | Zip Code: |
| Emergency contact name & number (<i>Other than a parent</i>): | |
| Previous Experience: (YMCA, NYS, Club, Other) | |

Parents

| | |
|-----------------------|-----------------------|
| Father/Guardian Name: | Mother/Guardian Name: |
| Cell Phone: | Cell Phone: |
| E-mail: | E-mail: |

I, the parent/guardian of the above-named child for a position on Oro Valley Basketball Academy (OVBA), hereby give my approval to participate in any and all OVBA activities, including transportation to and from the activities. I know that participation in basketball may result in injuries to players, and do hereby waive, release, absolve, indemnify, and agree to hold harmless Oro Valley Basketball Academy, the organizers, sponsors, supervisors, participants and persons transporting my child whether result of negligence or for any other cause. I agree that my child may be required to try out for a team. If such child does not attend at least 50% of the practices, the local Board of Directors approval is required for such candidate to be placed on a team. I will furnish a certified birth certificate of the above-named candidate if requested.

Signature: _____ Date: _____

ORO VALLEY BASKETBALL ACADEMY

Image Release – MINOR

READ BEFORE SIGNING

In consideration of (insert child's name) _____, my minor child/ward being allowed to participate in any way, in the Oro Valley Basketball Academy (OVBA) national championships and any other official AAU events and activities, the undersigned agrees that Oro Valley Basketball Academy (OVBA) is hereby granted the unrestricted right and permission, free from approval or review. To copyright and/or use my child(ren) in all media now or hereafter known, including but not limited to, pictures and videos of my child which he/she may be included intact or in part or promotion or other commercial use.

Print Name of Parent/Guardian:

Parent/Guardian Signature:

Date Signed:

Oro Valley Basketball Academy

Waiver and Release of Liability-Minor

Read Before Signing

My child/ward being allowed to participate in *Oro Valley Basketball Academy League plan, Tournament Play and exhibition play or any OVBA* affiliation(s), athletic sports program, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury to my child/ward, myself, from the activities involved in these programs is significant, including the potential for permanent disability, paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. FOR MYSELF, SPOUSE, AND CHILD/WARD, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and known EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for child/ward, participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant concern in my child/wards', readiness or, hazard during presence or participation, and/or in the program itself, I will remove my, child/ward, from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself: my spouse, my child/ward, and on behalf of my /our heirs , assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS OVBA, their officers, directors, officials , volunteers, agents, and/or employees, other participants, sponsoring agencies, tournaments host, sponsors, advertisers, and if applicable, owners and leasers' of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, incident to my child/wards', involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHER WISE , TO THE FULLEXT EXTENT PERMITTED BY LAW.
5. I, for myself, my spouse, my child/ward, and on behalf of my /our heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releasees from any and all liabilities incident to my child/ward' s involvement or participation in these programs, EVEN ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AG REEMNT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Print Name of Parent/Guardian:

Parent/Guardian Signature:

Date Signed:

UNDERSTANDING OF RISK

I understand the seriousness of the risks involved in participating in this program, my personal responsibilities for adhering to rules and regulations, and accept them as a participant.

Print Participant's Name:

Participant's Signature:

Date Signed