

3V3 Basketball Tournament Team Registration Form

Team Name: _____

Event reserves the right to reject any team name deemed inappropriate

Tournament Division (Select one): _____ 12-14 yrs _____ 15-17yrs _____ 18 +

SPORTSMANSHIP PLEDGE

By completing this form, all players accept responsibility for their conduct at the 2016 Seminole Nation Days 3v3 Basketball Tournament. The event coordinator reserves the right to disqualify and eject any individuals and /or teams that behave in an unsportsmanlike manner.

TEAM ROSTER

TEAM CAPTAIN

NAME: _____ AGE: _____ GENDER: ___ M ___ F

ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____ PHONE: _____

(Must have a valid contact number)

PLAYER 2

NAME: _____ AGE: _____ GENDER: ___ M ___ F

ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____ PHONE: _____

PLAYER 3

NAME: _____ AGE: _____ GENDER: ___ M ___ F

ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____ PHONE: _____

PLAYER 4

NAME: _____ AGE: _____ GENDER: ___ M ___ F

ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____ PHONE: _____

REGISTRATION FEES

TEAM FEE: 12-14 \$20.00 per team

15-17 \$20.00 per team

18 + \$30.00 per team

CASH ONLY!!

REGISTRATION ENDS September 14, 2016 AT 5PM – NO EXCEPTIONS!!

All TEAM PARTICIPANTS WILL NEED TO SIGN "RELEASE AND WAIVER OF ALL CLAIMS"

Release and Waiver of All Claims

Agreement regarding risk of injury and release

I hereby apply to participate in the Seminole Nation 2016 3v3 basketball Tournament: Located Mekasukey Basketball GYM 35445 HWY 59, Seminole, Ok. 74868 on September 17, 2016.

I understand that participating in the Tournament will expose me to above normal risks of injury or harm. These risks include uneven or hazardous playing surfaces, physical contact or collisions with other players, spectators or inanimate objects on or about the court. I understand that the sport of basketball is in itself hazardous and may result in injury to me or other players.

I represent that I have no health or physical problems that will interfere with my participation in the Tournament.

I agree that I am responsible for my own safety.

I hereby assume all risks associated with my attendance and participation in the Tournament. I understand that I am solely responsible for any injuries which may occur as a result of my participation in the tournament and I specifically waive my right to bring litigation against the Seminole Nation of Oklahoma sponsors and specifically release any right which I have to assert a negligence claim against the Tournament sponsors, their agents or representatives.

I hereby fully and forever release, discharge, and agree not to sue the Seminole Nation of Oklahoma and any other sponsors (hereafter called "Tournament Sponsors") their officers, directors, agents, employees, representatives, and successors for any and all claims, causes of action or liability for any injury, loss or damage sustained or incurred by me arising out or in any way associated with my attendance at or participation in the Tournament, including all claims, causes of action or liability arising out of negligence of Tournament Sponsors, their agents or representatives.

I agree to indemnify and hold harmless Tournament sponsors, their agents or representatives from any loss, damage or expense sustained or incurred by them arising from such claims, cause of action or liability, whether brought to me, anyone acting on my behalf, or by anyone else because of conduct attributed to me.

CONTINUE ON BACK

I agree that this agreement shall be construed and interpreted according to the Seminole Nation of Oklahoma.

I understand and agree that this Release and Waiver shall be binding upon my heirs, assigns and any personal entity acting upon my behalf, including a parent, guardian, or next friend.

I have read the above items of the Release and Waiver, understand them, agree to abide by them, and hereby acknowledge that I have read and understand this Release and Waiver.

Date: _____, 2016

1) I am at least 18 years old. _____
Print Name Signature

OR

2) Participant: _____ is less than 18 years old.

I sign this release on his/her behalf, and hereby agree to indemnify and hold harmless tournament sponsors, the agents or representative, from any loss, damage or expense sustained or incurred by them arising from any claim, cause of action or liability which may be brought by my minor child.

I sign this release on his/her behalf: _____
Print Name Parent/Guardian Signature

MAIL:
C/O CHR
PO Box, 1498
Wewoka, OK, 74884