I understand, recognize, and acknowledge that participating in any sport or physical activity can be dangerous and can involve many risks of serious injury and/or death. I am voluntarily participating in sports and other physical activities and using equipment while training with Hoop Mountain Basketball with knowledge of the dangers and risks involved. I hereby assume and accept any and all risks associated with my participation in sports or other physical activities with Hoop Mountain Basketball wherever the training may occur. In consideration of being presented an opportunity to participate in sports and other physical activities with Hoop Mountain Basketball, I understand that Hoop Mountain Basketball, or the property where the session is held and any or all of its officials cannot be held responsible in whole or in part for any accidents, illness or injuries resulting in medical or dental expenses incurred from participation in this program. I hereby release each of them from and against any and all claims, costs, liabilities, and injuries incurred while in training. I agree to assume full and complete responsibility for any and all medical bills arising from a player’s participation. In the event of an emergency, I authorize the coaches to exercise its judgment in the treatment of said player by a medical authority. By signing this release and agreement I acknowledge that I have read and fully understand and agree to all its terms. I have read and understand this document, and voluntarily agree to be bound by it. I further state that I am at least 18 years of age, or if not, my parent/guardian has also signed, and is competent to sign this waiver.

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Player Signature (if 18): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Player Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_