

BEYOND BASKETBALL

MIDDLE SCHOOL BASKETBALL TOURNAMENT

Team Registration Form

Team Name: _____

Division (select one):

Boys School

Girls School

Boys Travel

Girls Travel

Type of School (if applicable):

Public

Private

Parochial

Independent

Grade/ Age Division: _____

Head Coach Name: _____

Email: _____

Phone: _____

Assistant Coach Name: _____

Email: _____

Phone: _____

Team Captains:

Scheduling Requests:



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Fee Agreement:

- 1) To participate in the "Beyond Basketball" Middle School Tournament teams are required to pay a minimum fee of **\$325.00**. Payment must be received prior to the start of the tournament and can be paid either by check or online on the team registration form. Please select your desired payment method below.

Check

Philadelphia Youth Basketball
1735 Market Street, Concourse Level
Philadelphia, PA 19103

Online

<http://bit.ly/2i1Cku8>

Liability Agreement:

- 2) In consideration of being allowed to participate in the event or activity referenced above, I acknowledge, appreciate, and agree that: 1) The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and, 2) I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, 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 unusual significant hazard during my presence or 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 Releasees, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors 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, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law. I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

By signing below, you certify that you have read this liability agreement, that you know and understand the meaning and intent of this agreement, and that you are entering this agreement knowingly and voluntarily.

Name of Team Representative (Print)

Signature of Team Representative

Date

