

## OLPS Youth Basketball Waiver

PLAYERS NAME: \_\_\_\_\_

PARENTS' NAME: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

\_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DATE OF BIRTH (AGE): \_\_\_\_\_ (\_\_\_\_) GRADE: \_\_\_\_\_

WAIVER: In consideration of my child's participation in the activities of the Prompt Succor Basketball Program, I do hereby agree to hold free from any and all liability Prompt Succor and its coaches, officers, employees and members, and do hereby for myself, my heirs, executors and administrators waive, release and forever discharge any and all rights and claims of damages which I/my child may have to which may hereafter occur to me/my child arising out of or connected with me/my child's participation in any activities of the Prompt Succor Basketball Program.

I hereby declare myself/my child to be physically sound and able to participate in the activities of the Prompt Succor Basketball Program.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Registration Fee: **\$50.00\***

Uniform Fee: **\$65.00\***

***\*Please write one check for the registration fee and for the uniform fee. Players will be allowed to keep their uniforms after the basketball season ends.***

Please make check payable to: **Prompt Succor Home and School**