

Elite Performance Athletics Basketball Camps

Website - eliteperformsports.com

E-mail – eliteperformsports@yahoo.com



Elite Performance Athletics Basketball Release Waiver

WAIVER RELEASE, ASSUMPTION OF RISK

I understand that my participation in the AAU, Elite Performance Athletics Basketball involves Risk and danger of serious and permanent bodily injury and death. I, or my parent/guardian if I am a minor, hereby release, hold harmless, discharge and agree not to sue AAU, Elite Performance Athlete Basketball, Robert L. Gibbs and/or any Basketball Coaches, Officials, Volunteers, Agents, Sponsors, Advertisers, Owners/Leasers of Premises for all liability from my participation in these and any other related travel, lodging, social/recreational activities. I also understand Elite Performance Athletics Basketball retain the right to use for publicity and advertising, photographs and video taken on the participants.

Medical Release

I have given my daughter/son permission to participate in the Elite Performance Athletics Basketball event, and I certify that she/he is in good health and can take part in all camp activities. If an injury occurs, I authorize the camp staff members to take all proper action and use emergency service available at the nearest hospital if necessary. I understand my personal insurance will be used in this case. In case of an emergency, I authorize the personnel to take action.

Participant's Name: _____ Male /Female

Age: _____ Basketball Experience: **Yes / No**

Parent/Guardian Signature: _____

Home Phone: _____ Cell: _____ Work: _____

Bring this signed form to the first day of camp. Each camper must have a signed copy with them at camp.