

**SANTA ROSA BEARCUBS BASKETBALL PROGRAM  
REGISTRATION and WAIVER FORM**

Players Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Parent/Guardian's Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Email address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**PLEASE CIRCLE PROPER CHOICES BELOW**

Boy	Girl	Grade: 6 7 8 9 10 11 12	Player uniform sizes:	Youth Small	Youth Medium
				Youth Large	Adult Small
				Adult Medium	Adult Large
				Adult X-Large	Adult XX-Large

**I would like to volunteer as (please circle):    Team Coordinator    Fundraiser Member    Scorekeeper**

My child has medical restrictions which their coach should be aware of. Yes \_\_\_\_\_ No \_\_\_\_\_  
(Asthma, epilepsy, diabetes, etc.) If yes, please explain \_\_\_\_\_

***Fees to accompany form:        \$850.00 per player***

**INSURANCE WAIVER**

I have insurance that covers my child to participate with SANTA ROSA BEARCUBS Basketball program.  
Insurance Company Name \_\_\_\_\_. If I do not have insurance for my child, nor do I wish to obtain insurance for my child, I know that it will be my full responsibility for any medical expenses incurred.

**PARENTAL CONSENT AND WAIVER OF LIABILITY**

I consent to, and give permission for, my child to participate with the SANTA ROSA BEARCUBS (SRBC) Basketball Program. I have no knowledge of any physical impairment that would be affected by my child's participation in the basketball program. I further agree to waive all liability of the SANTA ROSA BEARCUBS (SRBC) Basketball Program, its representatives, employees, Managers, team coaches, and any other participant, for any accident, injury, illness or other mishap which might befall the individual named on this registration while traveling to or from, or during their participation in the basketball program, whether or not such liability, claim, damage, loss or expense is caused in part by the negligence of any person, including any negligence by or on behalf of the SRBC Basketball Program, its agents and specifically including any defects in the condition of the property of the SRBC Basketball Program or the condition of its maintenance. I consent (yes or no) to emergency medical care for my child in case of sickness or injury, and any actual charges made for such care. I agree to abide by the rules and regulations as set forth by the SRBC Basketball Program for my child's participation, and that each player will be responsible for herself/himself, her/his insurance and her/his equipment. I acknowledge that I have freely and voluntarily entered into this Agreement and that I have read and understand this agreement in its entirety.

**Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19**

The novel coronavirus ("COVID-19") has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people. SANTA ROSA BEARCUBS (SRBC) has put in place preventative measures to reduce the spread of COVID-19; however, cannot guarantee that you will not become infected with COVID-19. Further, attending any program or activity with SANTA ROSA BEARCUBS (SRBC) could increase your risk of contracting COVID-19. By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19 while attending SANTA ROSA BEARCUBS (SRBC) activities and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 while participating in practice or competition under SANTA ROSA BEARCUBS (SRBC) may result from the actions, omissions, or negligence of myself and others, including, but not limited to, SANTA ROSA BEARCUBS (SRBC) employees, volunteers, and

program participants and their families. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I may experience or incur in connection with my attendance and or participation in any activities or ("Claims"). On my behalf, I hereby release, covenant not to sue, discharge, and hold harmless SANTA ROSA BEARCUBS (SRBC), its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of SANTA ROSA BEARCUBS (SRBC), its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after attending any SANTA ROSA BEARCUBS (SRBC) program or activity.

**PARENTAL CONSENT:**

I am the minor's parent or guardian named above and I understand the nature of the Waiver of Liability above and verify and consent to the minor attending any practice and or tournament. On the minor's behalf, I hereby release, covenant not to sue, discharge, and hold harmless Santa Rosa Bear Cubs Basketball (SRBC), its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. On behalf of the minor, I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of Santa Rosa Bear Cubs (SRBC), its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after attending in any Santa Rosa Bear Cubs Basketball (SRBC) program or activity.

I hereby give my consent for the above child to participate in the SANTA ROSA BEARCUBS Basketball Program.

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**Printed Name of Parent/Guardian**

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**Date**

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**Signature of Parent or Legal Guardian**

**Please return form and check made payable to SANTA ROSA BEARCUBS BASKETBALL**



**Santa Rosa Bear Cubs Basketball**



## **Parent's Commitment & Code of Conduct**

- Support the team and program in a positive manner.
- Make Sure Athletes arrive at Practices and Games on time. (Notify Coach if they will be late or absent)
- Make required payments in a timely manner.
- Treat coaches, parents, opposing athletes, referees, opposing team parents and each other with respect.
- Use appropriate language at all club functions.
- Encourage your athlete to play by the rules.
- Never** ridicule or shout at your child and/or another child for making a mistake during games or practices.
- Attend as many club functions (lunches, dinners and family time) as possible.
- Exhibit good sportsmanship at all times.
- If you cannot attend an event, allow other families to take your student athlete when possible.
- Set the example and tone for the athletes.
- Positively encourage athletes during games and at home.
- Be positive and supportive when things are going well and even more positive and supportive when they are not.
- Let the coach focus on the game without interruption.
- Make only positive comments about any athletes at games or at home.
- Have Fun, enjoy the fact that your athlete is healthy enough to play and have fun.
- Do not try to coach your athlete between games.
- Encourage your child to participate in fundraising activities.
- Allow a 24-hour cool off period before discussing any complaint with a coach.

I hereby agree to the policies and guidelines set by the SANTA ROSA BEARCUBS Basketball Program.

Date \_\_\_\_\_

Signature of Parent or Legal Guardian \_\_\_\_\_