



Massasoit Warriors Basketball Club

Tryout charge \$10.00 Check _____ Cash _____

Player Name: _____ Birth date: ___/___/___ Age: _____ Grade: _____

Address: _____ City: _____ Zip: _____

Cell Phone: _____ E-Mail: _____

Parent/Guardian Name(s): _____

Home Phone: _____ Cell Phone: _____

E-Mail(s): _____

Current Player Uniform # _____

I the undersigned parent or guardian give approval for the participation of the above named player in all activities of the Massasoit Warriors Basketball Club during the current season and assumes all the risks and hazards incidental to the conduct of the activities. I understand and fully accept that there are risks involved in sports that accidents and injuries are common occurrences in sports. In addition, I acknowledge and understand the risk of exposure and or contracting COVID-19. I hereby release and hold harmless Massasoit Warriors Basketball Club staff, volunteers, coaches, and program officials from all liability, and from all actions or claims that the above named player or hereafter have for damage or injury to the above named player or to any person or property, resulting from the negligence or other acts of any employees or volunteers in connection with the players' participation. I further agree to indemnify and to hold Massasoit Warriors Basketball Club volunteers, coaches, and program officials free and harmless from any loss, liability, damage, cost or expense which they may incur as a result of any injury and/or property damage that the above named player may cause or sustain while participating in this activity.

Parent or Guardian's Signature _____ **Date** _____