

Adult Member Application

Member Name:

Member Date of Birth: _____

Gender: _____

School
name/Occupation: _____

T-shirt size: _____

Street Address, City and Zip Code

Include ALL phone numbers we can CALL to speak to you OR send you text messages

Email

Facebook/Instagram/Snapchat page name

Emergency Contact

Name: _____

Phone Number _____

Member Name: _____ Date: _____

Member Signature: _____

South Gator Basketball Club

+ Student Athlete Training

+ 6-10 players \$13 per player for 1 hour class OR + \$40 monthly membership 4 hours a month

+ 5 players \$18 per player for 1 hour class OR + \$60 monthly membership 4 hours a month

+ 2-4 players \$38 per player for 1 hour class OR + \$140 monthly membership 4 hours a month

+ Offsite 10+ player \$23 per player

Select a day(s) and time(s)

+ Wednesday + 4pm + 5pm

+ Thursday: +4pm, +5pm, +6pm

+ Friday: +4pm, +5pm, +6pm, +7pm, +8pm

+ Saturday: + 10am + 11 am + 12pm + 1pm + 2pm, + 3pm, + 4pm
(1st Saturday of the month NOT available)

+ Sunday: + 12pm, + 1pm, + 2pm, + 3pm, + 4pm, + 5pm

+ Saturday Basketball and Movement Clinic

1st Saturday of every month

10am - 12pm

\$50 class

Basketball Training 1 hour

Physical Therapy Class 1 hour

- 5 member minimum required per age
- Class availability will vary per age level

+ BD Fitness Class

\$18 for adult class

+ Monday 6am or 7pm

+ Tuesday 6am or 7pm

+ Wednesday 7pm

+ Thursday 6am or 7pm

+ Friday 6am

+ Saturday 9-10 am

Member Name: _____ Date: _____

Member Signature: _____

South Gator Basketball Club

+ Basketball Fundamentals School

Monthly Membership \$93 for 4 hours of monthly basketball training

- **5 player minimum per age/experience level**

Select a day(s) and time(s)

+ Wednesday OR + Thursday: +4pm, +5pm, +6pm

+ Friday: +4pm, +5pm, +6pm, +7pm, +8pm

**+ Saturday: + 10am + 11 am + 12pm + 1pm + 2pm, + 3pm, + 4pm
(1st Saturday of the month NOT available)**

+ Sunday: + 12pm, + 1pm, + 2pm, + 3pm, + 4pm, + 5pm

+ Integral Basketball Program - Monthly Program

\$100 monthly membership

- **5 member minimum**

1st Saturday of every month: Physical Therapy Class time TBA

2nd Saturday of every month: Basketball Training time TBA

3rd Saturday of every month: Basketball Training time TBA

4th Saturday of every month: Basketball Training time TBA

+ Move Better, Play Better Class (45 Minute class)

+ \$10 upgrade for 60 minute class

First Saturday of every month

+ \$40 for 3 member group

+ \$30 for 4-6 member group

+ \$20 for 7-8 member group

+12pm +1pm +2pm +3pm +4pm

Member Name: _____ Date: _____

Member Signature: _____

South Gator Basketball Club

SPECIAL NOTATIONS REGARDING MEDICAL HISTORY _____

If the above person needs emergency medical treatment and emergency contact can't be reached, consent is hereby granted for such emergency in the opinion of the attending physician.

Signature of Member

NO MAKE-UP SESSIONS IF YOU DO NOT ARRIVE TO YOUR SCHEDULED SESSION OR CANCEL YOUR SESSION. NO EXTENSION OF TIME IF YOU ARRIVE LATE TO YOUR SCHEDULED SESSION.

CONSENT AND INFORMATION FORM

I hereby apply for participation in the South Gator Basketball Club. I hereby warrant that I am aware of the risks associated with participation in an active sport such as basketball; furthermore, I warrant that I am in good health, have no condition or defect which would interfere with my participation, or would be in any way affected by such participation.

I do hereby agree to my participation in South Gator Basketball Club, and also assume all risks and hazards which are incidental to the conduct of the activities. I hereby release, absolve, indemnify and hold harmless South Gator Basketball Club, its officers, directors, employees, agents, their sponsors, organizers, and supervisors of any and all liability or damage, injury, or expense of any kind arising of or connected with my participation in South Gator Basketball Club.

Participation in competitive athletics and training may result in serious injury. It is impossible to TOTALLY eliminate such occurrences from competitive sports and training. Players can reduce the risk of serious injury by obeying safety rules, following a proper conditioning program, and maintaining their equipment properly.

EVEN IF ALL THESE REQUIREMENTS ARE MET, AND EVEN IF THE MEMBER IS IN EXCELLENT PHYSICAL CONDITION WITH PERFECT EQUIPMENT, A SERIOUS ACCIDENT MAY STILL OCCUR. AS A CONDITION OF PARTICIPATION IN THE SOUTH GATOR BASKETBALL CLUB PROGRAM BY _____ (member's name) I ACKNOWLEDGE THAT I READ THIS CONSENT FORM AND KNOWING ASSUME ALL THE RISKS ASSOCIATED WITH PARTICIPATING IN ANY WAY IN THE SOUTH GATOR BASKETBALL CLUB PROGRAM.

PHOTO RELEASE

I hereby grant permission to *South Gator Basketball Club* to use photographs and/or video of me taken during South Gator Basketball Club events in publications, news releases, online, and in other communications related to the mission of *South Gator Basketball Club*.

Member Name: _____ Date: _____

Member Signature: _____

South Gator Basketball Club

Member Name: _____ Date: _____

Member Signature: _____