

# 1<sup>st</sup> Annual Stone Foltz Hoops 4A Change

## “Youth Hoops” Registration

Minimum (2) Game Guarantee

**Date:** Sunday, November 21, 2021 – 8AM-6PM

**Locations:** Buckeye Valley High School and Middle School

\*Please send separate entry form and registration fee for each team entered.

5<sup>th</sup> Grade Boys     6<sup>th</sup> Grade Boys

5<sup>th</sup> Grade Girls     6<sup>th</sup> Grade Girls

**Team Name:** \_\_\_\_\_

**Head Coach:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Mobile # to be reached during tourney:** \_\_\_\_\_

**Assistant Coach:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

For rules, please check our website at <https://www.iamstonefoltz.com>

For additional information email DJ Williams @ [djwilliams@iamstonefoltz.com](mailto:djwilliams@iamstonefoltz.com)

**Registration Fee: \$200. Make checks payable to: iamstonefoltz FOUNDATION. Please send check, registration form and individual releases by November 1, 2021 to:**

**iamstonefoltz FOUNDATION**

**6039 Dublin Road**

**Delaware, OH 43015**

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## WAIVER & RELEASE OF LIABILITY

This is to certify that I, as parent/guardian with legal responsibility for my minor child or ward, acknowledge that my child or ward will be engaged in activities that involve risk of injury at an iamstonefoltz FOUNDATION event and that I do recognize and assume that risk, whether foreseeable or not reasonably foreseeable, on behalf of my child or ward, and consent on behalf of my child or ward, to his/her participation in activities and instruction at the event.

For myself and on behalf of my child or ward and his/her legal representatives, I hereby release and agree to indemnify iamstonefoltz FOUNDATION, their affiliates, administrators, directors, agents, coaches, and its employees, other participants, and sponsor agencies from any and all claims and damages instituting or arising out of my minor child's or ward's involvement or participation in the programs by the iamstonefoltz FOUNDATION whether or not arising as a result of the negligence of the operators of such facilities.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

## MEDIA RELEASE

I hereby allow the iamstonefoltz FOUNDATION to record and publish photos and videos (including audio) of myself or my minor child for the purpose of promoting the iamstonefoltz FOUNDATION and for documenting and/or reporting events and activities. I understand photographs, video and/or audio tape recordings may be taken of myself and/or family members during competition, recreational play, as well as other Foundation- related events. I understand that this media will be produced and used for promotional purposes and I authorize iamstonefoltz FOUNDATION to use my/our photograph, video and/or audio recording on its website and social media platforms, such as Facebook, Twitter, YouTube, etc., as well as other official printed publications without further consideration. I also understand that once my and/or my family members' image(s) have been captured, and are posted on the iamstonefoltz FOUNDATION website or social media platforms, the image(s) can be downloaded by any computer user on or off the premises.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_