EDMONTON PRO-AM BASKETBALL
2019 MENS SPRING TOURNAMENT
TEAM REGISTRATION FORM
ALL REGISTERED PLAYERS ARE REQUIRED TO SIGN THE WAIVER FORM

RELEASE, WAIVER AND INDEMNITY

The undersigned provides the waiver and acknowledgments set out below on his own behalf: IN CONSIDERATION OF THE EDMONTON PRO-AM BASKETBALL ASSOCIATION (Pro-Am), granting to the undersigned permission to play basketball in the leagues organized by the Association and permission to enter facilities rented or occupied by the Association, the undersigned hereby waives any and all claims for damages, losses, costs, liabilities or expenses to my person or property, of any nature or kind, which may be caused by any act, or failure to act, or the Association, its officers, directors, agents, division representatives or employees. I make this waiver voluntarily with full knowledge of the nature and rules of basketball and in recognition of the fact that I may suffer serious injuries as a result of participating in the leagues organized by the Association.

I also acknowledge the following:

• I am aware that Pro-Am regulations contain discipline procedures that include fines and suspensions that team members may be subject to if we violate any of the rules contained therein.

• In order for Pro-Am to ensure that only registered players participate, I may be required to produce photo ID (such as a driver's licence) during any game upon request, or wear a jersey provided by Pro-Am.

• That Pro-Am will use the personal information, video footage, game stats collected here for league administration, and website presentation, promotion only. As per FOIP Privacy Policy.

Date and Location

Games will be held on Sundays between 1:00pm and 6:00pm at Millwoods Christian School (8710 Mill Woods Rd NW). Starts on April 7, 2019. Schedule will be posted on www.edmontonproambasketball.com.

Deadline: March 25, 2019

Fee: $1,200.00/team

Payment Method
_____PayPal   _____E-Transfer (edm.pabbl@gmail.com)   _____Cash

Minimum 10 players and up to 15 players

Player Name (First & Last)	Phone No.	E-mail	Date (mm/dd/yyyy)	Signature

_____   _____
WITNESS   DATE