

**Alameda Vipers Basketball - Tryout Waiver - 2017-2018**

**Grade \_\_\_\_\_ Age (as of today) \_\_\_\_\_ Tryout Waiver # \_\_\_\_\_**

*Waiver must be completed and returned prior to your child's participation (one child per form )*

(Child's Name) \_\_\_\_\_ Birth date (and year): \_\_\_\_\_

School: \_\_\_\_\_ City: \_\_\_\_\_, California

(Parent/Guardian Name#1): \_\_\_\_\_ #1 Phone \_\_\_\_\_

(Parent/Guardian Name#2): \_\_\_\_\_ #2 Phone \_\_\_\_\_

Address: \_\_\_\_\_  
(Street City State Zip Code)

Email #1: \_\_\_\_\_ Email #2: \_\_\_\_\_

Will the prospective player be participating in any other sports/activities during club's AAU season?

Will you be able to transport your child to/from practice and games? \_\_\_\_\_

**Emergency Information: If we cannot contact parents during the tryout, call:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

I/(Parent/Guardian) in return for my child's (Child's Name) opportunity to participate in Alameda Vipers AAU Tryouts do hereby exempt and release Alameda Vipers, its directors, officers, employees, and agents from any and all liability, claims, demands or actions whatsoever arising out of any damage, loss, or injury that my child or I might sustain while my child is participating in Alameda Vipers AAU Tryouts, whether or not damage, loss or injury results from the negligence of Alameda Vipers, its directors, officers, employees, volunteers or agents or any defective equipment. I hereby authorize the staff of Alameda Vipers to act for me according to their best judgment in any emergency situation requiring medical attention. I hereby release, discharge, indemnify, and hold harmless Alameda Vipers from any and all liability, injuries, or illnesses incurred while participating in AAU Tryouts. I understand and assume hazards associated with this activity and waive all claims against Alameda Vipers, its directors, officers, employees, and agents. I/we understand that if I/we do not sign this release, then my child will not be permitted to participate in Alameda Vipers AAU Tryouts. I/we hereby represent that I am/we are the Parent(s)/guardian(s) of (Child)

I hereby grant Alameda Vipers, its representatives and employees, or anyone authorized by Alameda Vipers, permission to use my likeness and/or the likeness of my child in a photograph in any and all illustrations, advertising, publications, including website entries, without payment or any other consideration. I understand and agree that these materials, including all negatives and positives, together with the prints, will become the property of Alameda Vipers and will not be returned. I hereby irrevocably authorize Alameda Vipers, its representatives and employees, or anyone authorized by Alameda Vipers, to edit, alter, copy, exhibit, publish or distribute this photograph for the purposes of publicizing Alameda Vipers programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness or the likeness of my child appears.

(Print Parent/Guardian name here) \_\_\_\_\_

Signature of Parent /Guardian & Date \_\_\_\_\_