



2020-2021 REGISTRATION FORM. MEDICAL RELEASE AND WAIVER OF LIABILITY

Players name _____ School _____
Grade _____ Age _____ D.O.B. ____/____/____
Street Address _____ City _____ TX Zip _____
Legal Guardian's Name _____ Phone (____) _____ - _____
Email address _____
Emergency Contact Name _____ Ph #(____) _____ - _____

Medical Release

My son / daughter has permission to attend the Be Elite Basketball program for the 2020-2021 Season, including leagues, camps, club, clinic, open gym, and practice (events). I fully realize that injury or illness could result from or during participation in the above listed events. In case of such accident or illness, I give permission for my child to be given treatment as deemed appropriate. I will assume responsibility for any medical bills incurred by my child at a local hospital or medical facility. This player is in good health and in proper physical condition to participate in sports activities.

Please Sign (Parent or Legal Guardian):

Date:

COVID-19

Each person listed above certifies that to the best of his or her knowledge neither they, nor a member of their household with whom they live, nor a person with whom they work with closely:

- 1.Has experienced any cold or flu-like symptoms in the previous 14 days (fever, cough, sore throat, respiratory illness, difficulty breathing).
- 2.Is currently diagnosed with COVID-19.
- 3.Has a test pending for COVID-19.
- 4.Is currently under quarantine due to COVID-19 concerns.



5. Has had contact in the previous 14 days with someone diagnosed with COVID-19.
6. Has had contact in the previous 14 days with someone who had contact with someone diagnosed with COVID-19.
7. Has traveled in the previous 14 days to anywhere designated as having widespread ongoing transmission by the Centers for Disease Control.

Waiver of Liability and Hold Harmless Agreement

I, _____, the player's parent/legal guardian, understand the nature of sports and the player's experience. I release, discharge, covenant not to sue, and agree to indemnify, save and hold harmless BEB, formally Be elite Basketball, and any coach/employee of Be Elite basketball from all liability claims, demands, losses, or damages on this player's account caused or alleged to be caused in whole or in part by the negligence of BEB. I further agree that if, despite this release, I, the player or anyone on the player's behalf makes a claim against Be Elite Basketball, I will indemnify, save, and hold harmless Be Elite Basketball from any litigation expenses, attorney fees, loss liability, damage, or any costs incurred as a result of any such claims.

Please Sign (Parent or Legal Guardian):

Date
