



PARTICIPANT REGISTRATION FORM

PARTICIPANT'S INFORMATION

FULL NAME:		GENDER: MALE / FEMALE	
BIRTHDATE: (Day) _____ (Month) _____ (Year) _____		AGE:	
STREET ADDRESS:		APT/SUITE #:	
CITY & REGION:	PROVINCE:	POSTAL CODE:	
HOME PHONE NUMBER:		# OF YEARS IN SNYB:	
MEDICAL HISTORY: (Please list any medical conditions that staff should be aware of)			

PARENT'S/ GUARDIAN INFORMATION

FULL NAME:			
HOME PHONE #:		BUSINESS PHONE #:	
EMAIL:			
EMERGENCY PHONE NUMBER & NAME (other than above parent/guardian):			
(Last)	(First)	(Primary Contact #)	(Secondary Contact #)

STEVE NASH YOUTH BASKETBALL WAIVER AND RELEASE OF LIABILITY

In considering of being allowed to participate in any way in the STEVE NASH YOUTH BASKETBALL program and related events and activities, the undersigned acknowledges, appreciates and agrees that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk of serious injury does exist; and,
2. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of Canada Basketball, referees, volunteers, agents and/or employees, other players or participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the STEVE NASH YOUTH BASKETBALL program and any related events and/or activities (the "Releases"), and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately, and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release and hold harmless the releases, with respect to any and all injury, disability, death, or loss or damage to person or property, whether caused by the negligence of the releases or otherwise.
5. I further agree to irrevocably grant Canada Basketball, and their affiliated Provincial/Territorial Sports Organizations or assigns, the perpetual unlimited world-wide and royalty free rights to record, reproduce, broadcast, exhibit, publish, sell, distribute or use in any way whatsoever, my name and likeness in any media, whether now known or hereafter developed, in connection with my attendance and participation in the STEVE NASH YOUTH BASKETBALL program, including without limitation a videotape recording of such performance. I agree that I shall have no claim, title or interest in my attendance or participation or any materials produced hereunder.

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all Releases, and, for myself, my heirs, assigns and next of kin, I have read this waiver and release of liability, fully understand its terms and agrees to indemnify the Releases from any and all liabilities to my minor child's involvement or participation in the program as provided above.

PARENT'S/GUARDIAN'S SIGNATURE

DATE SIGNED

If you would like to become a Canada Basketball Email Insider and receive information via email on upcoming Canada Basketball events (e.g. athlete development clinics, coach's clinics, etc.), please check the box below.

Yes, I would like to become a Canada Basketball Email Insider.

