



Tryout #

## Palm Beach Flight Basketball Tryout Registration Form

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ATHLETE'S NAME: \_\_\_\_\_

DATE OF BIRTH: MO: \_\_\_\_\_ DAY: \_\_\_\_\_ YEAR: \_\_\_\_\_

GRADE (2015 - 2016 year): \_\_\_\_\_ SCHOOL: \_\_\_\_\_

HOME STREET ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_, \_\_\_\_\_

ATHLETE'S PHONE: (HOME) \_\_\_\_\_ (CELL) \_\_\_\_\_

PARENT NAME(S): Mother: \_\_\_\_\_ Father: \_\_\_\_\_

EMERGENCY CONTACT NAME & NUMBER: \_\_\_\_\_

PARENT'S EMAIL ADDRESS: \_\_\_\_\_

### MEDICAL WAIVER AND RELEASE

The Palm Beach Flight (Twinbull Sports) and any facilities where tryouts, practices, or games will be played will assume no liability for injury or damages arising from the results of the above named Athlete's participation unless due to the willful misconduct or gross negligence on the part of the Palm Beach Flight (Twinbull Sports), its affiliates, agents, or authorized persons. Due to the strenuous nature of basketball, the Athlete participating and their parents are urged to consult their physician concerning the Athlete's fitness to participate. Basketball presents certain inherent risks and hazards, which the participating Athlete is urged to consider and which the Athlete assumes. I hereby approve of the participation of my child, the above named Athlete, in Palm Beach Flight (Twinbull Sports) tryout program and consent to the emergency medical treatment for my child on my behalf. To the best of my knowledge, there are no physical or other conditions, which will interfere with my child's participation.

In consideration of my engagement or my child's involvement with the Palm Beach Flight (Twinbull Sports), I hereby release, discharge and covenant not to sue Palm Beach Flight (Twinbull Sports), from any and all present and future claims or causes of action resulting from any accidents, injuries, deaths, or loss of and/or damage to my/our person(s) or property arising out of or connected with my or my/our child's participation in the Palm Beach Flight (Twinbull Sports) activities.

PARENT NAME: \_\_\_\_\_

PARENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**Parents must sign form at tryouts, in order to receive a tryout number.**