



PHOENIX BASKETBALL HOUSE LEAGUE RELEASE FORM

\$50 registration fee will be collected at tryouts/registration. ALL PLAYERS MUST ATTEND TRYOUT.

A signed copy of this form along with a copy of the child's registration form and health card # will be required when you attend tryouts.

Insurance: It is the responsibility of every individual and their parent or legal guardian, to provide for their own accident and health coverage while participating in all youth activities. This organization does not provide any such coverage for its participants.

AUTHORIZATIONS and RELEASE: Photograph Permission: I give permission for Ottawa Phoenix Basketball to use any pictures of my child for future promotional purposes.

Medical Treatment: I hereby give permission for my child to be given cardiopulmonary resuscitation (CPR) and first aid treatment by a qualified staff member of Ottawa Phoenix Basketball. In the event I cannot be contacted, I also give permission for my child to be transported by ambulance or aid car to an emergency center for treatment. I further consent to the disclosure of health information and to the medical, surgical and hospital care treatment and procedures (including, but not limited to, administration of necessary anesthetics, tests, x-ray examinations, transfusions, injections, drugs) to be performed for my child by a licensed physician or hospital selected by the first responders on the site and the Ottawa Phoenix Basketball director when deemed immediately necessary or advisable by the physician to safeguard my child's health.

Release from Liability: Recognizing that Ottawa Phoenix Basketball will do its best to ensure a safe experience, I understand that accidents may occur both from my child's participation in youth sports activities and from transportation to and from the program. I agree to assume these risks. By signing below, I release Ottawa Phoenix Basketball and its employees, volunteers, independent contractors, directors and agents from all liability based on any damage, loss or injury whether it is the result of ordinary negligence or otherwise, caused to my child or to me, from participation in the youth sports program.

I have read and understand the above and have completed this form to the best of my ability. The participant and the parent will abide by all Ottawa Phoenix Basketball House league rules, values and morals. There will be a zero tolerance policy for non-compliance of any unsportsmanlike behavior. Any violation of such may result in a termination of the participant from the house league without reimbursement. I also support the Ottawa Phoenix Basketball youth sports philosophy, which is based on participation, fun, physical fitness and health, skill development, teamwork, fair play, family involvement and volunteer leadership.

Parent Signature _____ Parent Printed Name _____

Date _____ Parent # in Case of Emergency _____

Participant Signature _____ Participant Printed Name _____

Date _____ Participant OHIP# _____