North Carolina Middle School Showcase

Player Registration Form

Name:

Player email:

Parent name:

Parent Email:

Parent phone number:

School:

Grade:

Height:

Twitter:

Liability Release & Acknowledgment

Liability Release & Acknowledgment: Participation in the athletic programs involves the risk of injury including, but are not limited to, collision with other participants, being hit by the ball, falling to the floor or into a wall, scratches, bruises, etc. By signing this form and in return for the opportunity to participate in F.O.O.T.P.R.I.N.T.S. basketball programs I, on behalf of myself, my children, my heirs, assigns, executors, and administrators, (a) acknowledge all risk of injury and death associated with participation in F.O.O.T.P.R.I.N.T.S. basketball programs, (b) assume responsibility should injury or death result from these risks, (c) waive any legal rights we may have to seek payment of any kind from, Coaching staff, F.O.O.T.P.R.I.N.T.S Inc., NC State Trooper training facility, Abundant Life Center, Cary Family YMCA, Ragsdale YMCA, Cary Parks and Recreation, Raleigh Parks and Recreation, Wake County Boys and Girls Club of America, the City of Cary, Grand Slam USA, Laurel Hills Community Center, Upper Room Christian Academy, Word of God Christian Academy, the Rush, Knightdale High School, Knightdale Community Center, the Town of Knightdale, Jaycee Parks Community Center, the City of Raleigh, and their employees or agents for bodily injury or death resulting from participation in any F.O.O.T.P.R.I.N.T.S. basketball programs, and to release those parties from any liability for damages resulting from any injuries or death, (d) acknowledge that no additional insurance coverage will be provided by Cary Family YMCA, Ragsdale YMCA, the City of Greensboro, Cary Parks and Recreation, Raleigh Parks and Recreation, Wake County Boys and Girls Club of America, the City of Cary, Grand Slam USA, Laurel Hills Community Center, the Rush, Knightdale Community Center, the Town of Knightdale, Jaycee Parks Community Center, the City of Raleigh, and their employees or agents, (e) agree to follow all rules and procedures of the program and reasonable instructions of the coaches.

All players must consult a physician before participating in an F.O.T.O.P.R.I.N.T.S. basketball event. Please list any special needs (medications, previous injury, disabilities or handicaps) which will require our coaching staff’s knowledge.

**Parent/ Guardian Signature Date**

Media Release Form

Dear Parents/ Guardians

We are honored to have your child participate in the NCMSS hosted by F.O.O.T.P.R.I.N.T.S. INC.; a 501 © 3 nonprofit organization dedicated to youth development and strengthening our community.

Photographs and video will display activities sponsored by FOOTPRINTS INC. We ask permission of you as guardian to have your child included in photographs and videos.

Please sign below indicating if you wish to allow your child permission to participate.

Yes, I give permission for F.O.O.T.P.R.I.N.T.S. INC. to include my child

No, I do not give permission for F.O.O.T.P.R.I.N.T.S. INC. to include my child

Child Name

Parent (print)

Parent Signature Date