

# MAGIC'S TOUR, LLC

TEAM NAME:	<input type="text"/>	AGE DIVISION:	<input type="text"/>
CONTACT NAME:	<input type="text"/>	ADDRESS:	<input type="text"/>
CITY:	<input type="text"/>	ZIP CODE:	<input type="text"/>
CELL PHONE:	( <input type="text"/> ) - <input type="text"/>	E-MAIL:	<input type="text"/>

**WAIVER:** Each player (and their parent or guardian if the player is under age 18) must read this WAIVER. Signatures on the registration form signify each person has read, and understands and abides by this information.

- 1) There are risks connected with my participation in the tournament and its related activities. I understand that participation in basketball and related activities involves certain risks, and may result in unavoidable injuries. The injuries may include muscle strains and tears, broken bones, and severe injuries including, but not limited to, permanent paralysis, or even death. I am fully aware of the risks and possibility of injury involved and acknowledge that I am assuming the risk of such injury by my child's participating.
- 2) Agree that prior to participating, they will inspect the facilities and equipment to be used, and if they believe anything is unsafe, will immediately advise their coach, supervisor or referee of such condition(s) and refuse to participate.
- 3) I release and discharge Magic Tour Basketball, LLC, all event charities, all event sponsors, all event organizers, all Magic Tour Basketball workers, employees and directors from all action, suits and demands whatsoever in law or in equity, including, but not limited to, the risk of injury from playing in the tournament and the risk of loss of personal property by theft or otherwise.
- 4) Player eligibility for NCAA, collegiate sports and local school districts vary. The event organizers are not responsible for determining each player's eligibility. Before registering, contact your coach or athletic director and ask how your eligibility would be affected, if at all, by registering for this tournament.
- 5) Further, I hereby grant full permission for event organizers to record any or all of my participation in this event for photos, motion pictures, TV, radio, recording, videotapes, and other media known or unknown, and to use them, no matter by whom taken, in any manner for publicity, promotions, advertising, trade or commercial purposes, without any reimbursement of any kind due to me, or the need to pay me any fee.
- 6) Payment for Events is due prior to event. Any problem with payments, such as checks that do not clear, pay pal that don't go through, will have a \$200 penalty, plus the amount of the check, plus Attorney Fees. All disputes will be handled at Bloomfield Michigan 48<sup>th</sup> District Court.
- 7) Refund Policy: For any teams purchasing a discount package there is no refund. For teams that purchase one event and pay full price will receive 100% refund as long as the team cancels participation in the event, and the cancellation date is more than 14 days before the event. Between 7 to 14 days before the event there is no refund, but you will be credited another event of equal or less value. Less than 7 days before the event there is no refund.
- 8) I acknowledge that I have read this Release and Waiver of Liability in its entirety and fully understand its contents. I am aware that this Release contains an acknowledgement of my voluntary and knowing assumption of the risk of illness or injury. I further acknowledge that I have signed this document voluntarily and of my own free will.
- 9) It is the responsibility of the Coach to add any new players and sign waiver form before that player can play in the event.

## COACH (1)

Name: \_\_\_\_\_  
Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_  
Player Signature: \_\_\_\_\_  
*(18-under must be signed by Parent / Guardian)*

## COACH (2)

Name: \_\_\_\_\_  
Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_  
Player Signature: \_\_\_\_\_  
*(18-under must be signed by Parent / Guardian)*

### Player (1) Captain

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Player Signature: \_\_\_\_\_

*(18-under must be signed by Parent / Guardian)*

### Player (2) Co-Captain

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Player Signature: \_\_\_\_\_

*(18-under must be signed by Parent / Guardian)*

### Player (3)

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Player Signature: \_\_\_\_\_

*(18-under must be signed by Parent / Guardian)*

### Player (4)

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Player Signature: \_\_\_\_\_

*(18-under must be signed by Parent / Guardian)*

### Player (5)

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Player Signature: \_\_\_\_\_

*(18-under must be signed by Parent / Guardian)*

### Player (6)

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Player Signature: \_\_\_\_\_

*(18-under must be signed by Parent / Guardian)*

### Player (7)

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Player Signature: \_\_\_\_\_

*(18-under must be signed by Parent / Guardian)*

### Player (8)

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Player Signature: \_\_\_\_\_

*(18-under must be signed by Parent / Guardian)*

### Player (9)

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Player Signature: \_\_\_\_\_

*(18-under must be signed by Parent / Guardian)*

### Player (10)

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Player Signature: \_\_\_\_\_

*(18-under must be signed by Parent / Guardian)*