

Northern Indiana Basketball Series

2017 Athlete Waiver/Release Form

In consideration of being permitted to participate in any way in any Pursuing Athletic Leadership, LLC (PAL) event, the undersigned, parents or legal guardian (if under 18) of the participant:

1. Agree and represent that I understand the nature of basketball and that I am qualified, in good health, and proper physical condition to participate. I also agree that if at any time I believe conditions to be unsafe, I will discontinue further participation in the PAL event.
2. Fully understand that athletic activities involve risks of serious injury, permanent disability, paralysis, and death and social losses, which might result not only from their actions or negligence, but the actions or negligence of others, the rules of play, or the condition of the tournament site or any of the equipment used. There may be other risks not known or foreseeable at this time.
3. Agree the parents or a legal guardian will inspect the facilities and equipment to insure proper safety for the minor participants. If anything is believed to be unsafe, a coach or NIBS staff should be notified immediately of such conditions and the participant will refuse to participate.
4. Pursuing Athletic Leadership, LLC (Northern Indiana Basketball Series) does not provide medical insurance. This is the responsibility of the parent or guardian. Each participant is to be properly insured and/or pay all medical costs in the event of an injury, and in the case of emergency must provide a contact person for each minor participant. Furthermore assume all risks and accept personal responsibility for damages following injury, permanent disability or death.
5. Release, waive, and agree not to sue PAL (NIBS), their directors, NIBS staff or volunteers of the organizations and venues (West Noble, Wawasee School Districts, The Zone Sports Complex, Grace College, Dr. Robert W. Browne Rec Center) and any other facilities that may be used for these basketball events). PAL and all NIBS staff are all released from demands, losses or damages on account of injury, death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the release.
6. I give my permission for the participants listed below to be used in any PAL (NIBS) promotions without compensation.
7. This waiver/agreement shall be binding upon the heirs, executors, and assigns of all of the undersigned.

Team Name

Coach's Name

Printed Name of Participant/
Parent/Guardian

Participant's Signature
Parent/Guardian

Date

Birth Date

Printed Name of Participant/
Parent/Guardian

Participant's Signature
Parent/Guardian

Date

Birth Date

Printed Name of Participant/
Parent/Guardian

Participant's Signature
Parent/Guardian

Date

Birth Date

Printed Name of Participant/ Parent/Guardian	Participant's Signature Parent/Guardian	Date	Birth Date
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