

CONSENT / WAIVER FORM :

RedStarBasketball.com / PanoramaHillsBasketball.com program/camps

parents name : (please print all)	email address:	phone #

player's name : (please print all)	date of birth	program:
		tiny (3-4) mini (5-7) rising (8+)

As the parents/guardians of: (player's name below)

_____ we give permission for our child to participate in the Basketball Program and/or camp in Calgary AB

It is my understanding that participation in these programs may involve, but is not limited to supervised games and activities inside the Centre. We are aware and acknowledge that certain risks of injury are inherent to participation in play based, recreational activities and sports. Injuries may be minor or serious and may result from one's actions, or the actions or inaction's of others, or a combination of both.

As the parent/guardian it is agreed that the **PanoramaHillsBasketball.com / RedStarBasketball.com**, its employees, servants and/or agents, managers and owners shall not be liable for any injury to our child participating in the Basketball Program or responsible for the loss or damage to their personal property arising from or in any way resulting from the participation in these activities.

As the parent/guardian it is agreed that the **PanoramaHillsBasketball.com / RedStarBasketball.com** may, in the event of an accident/injury secure medical advice and services as it, in its sole discretion, may deem necessary for our child's health and safety and we shall be financially responsible for such advice and services.

We declare that we have read understood and agree to the contents of the **Consent /Waiver Form** in its entirety.

"I hereby consent to the use of and grant to the **PanoramaHillsBasketball.com / RedStarBasketball.com** the right to use, for the purposes of promoting the Basketball program thru official websites and other social media sites, any photographs taken of the following minor while they attend the **indoor/outdoor basketball camp / program**.

I grant such consent as parent and/or guardian to the following minor pursuant to Section 17(2)(a) of the Freedom of Information and Protection of Privacy Act. **I understand no other personal information about the minor will be released by PanoramaHillsBasketball.com / RedStarBasketball.com** without my permission."

_____, 20__

Child's Name Parent/Guardian signature Witness Date

Completed consent forms must be returned to the PanoramaHillsBasketball.com/RedStarBasketball.com prior to or at the first day of the program. Failure to comply could result in a child being excluded from participation in indoor basketball program and/or day camps organized by PanoramaHillsBasketball.com and RedStarBasketball.com

The Freedom of Information and Protection of Privacy Act (FOIP) governs information collected for this program. The information collected will be used only in the event of an emergency. This form will be destroyed at the end of the calendar year

for office use only			date:	
waiver:	uniform:	payment: online cash cheque	season: 1.winter 2.spring 3.summer 4.fall:	refund: (if any)