

BECKER YOUTH BASKETBALL ASSOCIATION

Michael Kramer 612-508-2081 Sandy Engdahl 320-333-8784
Shelly Kerzman 612-703-7525 Laura Kangas 320-743-5110 Donna Croatt 763-262-0182

LIABILITY WAIVER & CODE OF CONDUCT FORM

Release and Waiver of Liability:

We acknowledge that there are risks involved with participation in basketball and its related activities, including the possibility of personal injury. We fully realize these risks and hereby release and forever discharge Becker Schools, Becker Youth Sports Association and affiliates from any and all claims or liabilities for personal injury or property loss that may occur.

We also authorize emergency first aid, medical treatment or surgery deemed necessary by licensed medical personnel or emergency response personnel in the event parents or legal guardians are not immediately available.

Disclosure Agreement:

Becker Youth Sports Association does not at this time require physical examinations or other written evidence that students are physically, emotionally, and mentally able to participate in these sports. It is understood that it is the sole responsibility of the parent or guardian to ensure that their children are physically, emotionally, and mentally ready to participate in practices as well as games. It is also the responsibility of the parent or guardian to notify the coaching staff of any limitations or conditions that may occur or could have an impact on the student’s ability to fully participate in these activities.

Code of Conduct:

I understand that I, my family, and individuals I’ve invited to watch are representatives of Becker and Becker Youth Sports Basketball. I will therefore conduct myself and encourage all others to have a positive attitude and portray good sportsmanship. I understand that I can be removed from any tournament or released from the team for continued unsportsmanlike conduct without returning of any previously paid moneys.

I also agree to address any problems or concerns privately with those involved first prior to publicly questioning or criticizing. In the event a resolution cannot be satisfactorily reached with those involved, one of the individuals listed at the top of this form will be contacted to help reach a resolution.

By our signatures below we affirm that we have read this form, understand its contents, and agree to be bound by its terms.

Student Name (print) _____ Grade _____

Student Signature _____ Date _____

Parent/Guardian Signature _____ Date _____