

Davenport Pioneer Days 3 on 3 Basketball Entry Form

Instructions: Complete the entire application and mail to SuperHoops P.O. Box 578 Davenport, WA 99122.

All entries must be received by July 15, 2009. One entry form must be completed for each team entered. If more applications are required please make photo copies or email request to Superhoops09@ymail.com or call Jeff Evers @ 725-0007.

INDEMNITY AGREEMENT

I know that participating in physical activities such as basketball is potentially hazardous to my health. I assume all the risks associated with playing in this event including but not limited to falls, contact with other players, effects of the weather, and condition of the playing surface; all such facts being known and appreciated by me. Knowing these facts and in consideration of your accepting my entry, I hereby for myself, my heirs, executors, administrators, or anyone else who might bring claims on my behalf, covenant not to sue, and waive release and discharge the Davenport Pioneer Days 3 on 3 Super Hoops Organization, Davenport Pioneer Days Association, its officers, the City of Davenport and any groups benefiting from this event, all volunteers, all sponsors, including their agents, employees, assigns or anyone acting on their behalf, from any and all claims of liability for death, personal injury, or property damage of any kind of nature whatsoever, foreseen, known or unknown. I hereby grant full permission to any and all foregoing use of photographs, videotape, motion pictures, recordings, or record of me or my likeness from this, that I am responsible for my own and my teammates conduct of play. I vow to represent myself and my team in a sportsman like manner. In the event that I fail to do so, I realize that both myself and my team may be ejected from the tournament. I agree to all the foregoing by placing my signature on this form in the appropriate locations below.

Team

Name: _____

Entry fee is \$65.00 per team, enclosed with your completed entry form.

TEAM CAPTAIN

Name: _____

Address: _____

City: _____ State: _____

Phone: _____

Age as of 6/01/09 _____

Shirt tickets may be redeemed day of
Tournament.

Player Signature: _____ Date: _____

Parent Signature if player under 18 Date: _____

THIRD PLAYER

Name: _____

Address: _____

City: _____ State: _____

Phone: _____

Age as of 6/01/09 _____

Shirt tickets may be redeemed day of
Tournament.

Player Signature: _____ Date: _____

Parent Signature if player under 18 Date: _____

SECOND PLAYER

Name: _____

Address: _____

City: _____ State: _____

Phone: _____

Age as of 6/01/09 _____

Shirt tickets may be redeemed day of
Tournament.

Player Signature: _____ Date: _____

Parent Signature if player under 18 Date: _____

FOURTH PLAYER

Name: _____

Address: _____

City: _____ State: _____

Phone: _____

Age as of 6/01/09 _____

Shirt tickets may be redeemed day of
Tournament.

Player Signature: _____ Date: _____

Parent Signature if player under 18 Date: _____