**ADULT BASKETBALL**
**WAIVER/RELEASE FORM**

I_____, agree to participate in any way in the St. Bart's Adult Basketball
(Your Name)

Program, related events and activities, the undersigned acknowledges, appreciates, and agrees to the following:

I realize that basketball is a vigorous physical activity that involves running, jumping, rotation, violent body contact, and rapid directional change.

I understand that participation in **basketball** involves certain inherent risks and that regardless of the precautions taken by St. Bart's Adult Basketball Organization or the participants, **some injuries may occur.** These injuries include but are not limited to:

**1. Sprains, strained muscles**
**2. Broken bones, dislocated joints**
**3. Permanent disability**
**4. Quadriplegia**
**5. Death**

These injuries may result from hazards such as but not limited to:

**1. Running into an opponent**
**2. Stepping on or tripping over another player**
**3. Running into a wall or other obstruction**
**4. Being struck by another opponent or the ball**

Adhering to the following safety rules may lessen the likelihood of such injuries:

**1. Properly warm up before practices or games**
**2. No "horseplay" or fighting during practices or games**

**I willing, agree to comply with the program's stated and customary terms and conditions for participation.** In order to properly protect myself and that of fellow participants, **I agree to follow these rules as well as any others that may be given** by the official or any other agent of the St. Bart's Adult Basketball Organization. Further, in recognition of the importance of shared responsibility for safety, I will remove myself immediately report any noted deviations from the safety rules as well as any observed hazardous conditions or equipment to the official or agent of the St. Bart's Adult League.

I further certify that my present level of physical condition is consistent with the demands of active participation in basketball.

**I HAVE CAREFULLY READ THE FOREGOING DOCUMENT. I HAVE HAD THE OPPORTUNITY TO ASK QUESTIONS AND HAVE THEM ANSWERED. I AM CONFIDENT THAT I FULLY KNOW, UNDERSTAND, AND APPRECIATE THE RISKS INVOLVED IN ACTIVE PARTICIPATION IN BASKETBALL.**

**HAVING BEEN INFORMED** of the above program to provide games for adults, I, the above-named registrant, do herby give my approval of his/her participation in any and all of the activities during the current season. **I ASSUME ALL THE RISKS AND HAZARDS INCIDENTAL TO THE CONDUCT OF THE ACTIVITIES,** and I, for myself, my spouse, and on behalf of my/our heirs, assigns, personal representatives and next of kin, do further **RELEASE, ABSOLVE, INDEMNIFY, AND HOLD HARMLESS** the St. Bart's Adult Basketball Organization, the organizers, sponsors, supervisors, volunteers, other participants, advertisers, officials, and if applicable, owner and lessors of premises used to conduct practices or games, any or all of them. In case of injury to myself, **I HEREBY WAIVE ALL CLAIMS** against the organizers, the sponsors, or any of the supervisors appointed by them. I am voluntarily requesting permission for myself to participate.

X_____ _____ _____
Signature Print name Date