

Bloomington Shootout

February 23rd and 24th 2019

ROSTER AND RELEASE FORM

(Please have each parent read and sign. A maximum of 12 children per team)

Waiver: *In consideration of my accepting to play in the Bloomington South Basketball Shootout, I hereby, for myself and our respective heirs, successors, executors and administrators, waive any and all potential claims for damages and release from liability all volunteers, participants, spectators, their employees, agents, heirs, successors along with the Monroe County School Corporation and assign for any injury or claim for damages that may arise by virtue of our participation in the Bloomington South Basketball Shootout.. I hereby attest that my child is physically fit and sufficiently prepared for competing in the event. If the Bloomington South Basketball Shootout is canceled, my entry fee will be refunded.*

Parent's Signature <i>(By signing below you acknowledge you have read and understand the release statement)</i>	Child's Name/Uniform #
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	

Team Name:	Boy/Girls (circle one)	Grade:
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