

Poolesville Basketball Association Falcon, Junior Falcon, and Mini-Falcon Camp Consent / Information Form

BRING THIS FORM WITH YOU ON THE FIRST DAY OF CAMP!

The participant and parent/guardian assume all risks associated with participation in the Falcon, Junior Falcon, and Mini-Falcon Basketball Camps. The Poolesville Basketball Association (including board members, administrators, coaches and other employees) assumes no liability for injury or damages arising from participation in the camps. By signing this form, I accept all financial and medical responsibilities for my child and authorize the management of the Falcon, Junior Falcon and Mini-Falcon Basketball Camps to obtain emergency medical care for my child's injuries or illness that might occur during the camp.

Due to the strenuous nature of some activities, the PBA encourages each participant to consult his or her physician concerning fitness in order to participate in the camps. The undersigned agrees (both personally and on behalf of the participant) not to sue, and releases, waives, and discharges the PBA, its coaches, volunteers, other participants, officials, and the PAA from any or all loss or damage.

The participant and parent/guardian also consents to PBA use of any photographs and/or videotapes that are made of the camp. Assuming the participant is a minor, the parent or guardian approves of his or her participation in the camp.

I agree to all conditions as described on this Consent Form:

Parent name (please print): _____

Parent/Guardian Signature: _____ **Date:** _____

Player Name: _____ **Age:** _____

**Best Phone Number(s) for Responsible Person to be reached
During Falcon, Junior Falcon and Mini-Falcon Camp operating hours:**

1. _____

2. _____

