

# 2009 A-TRAIN FOR YOUTH BASKETBALL CAMP REGISTRATION FORM

Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ Birth date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Email Address \_\_\_\_\_

T-Shirt Size (circle one) \_\_\_\_\_ Youth: M L Adult: M L XL 2XL

Parent/Guardian \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_

**As a condition of my child's participation in the A-Train for Youth Basketball Camp and in consideration for the privileges that come from participation in that camp which may include instruction, use of facilities and equipment and other services provided by the A-Train for Youth Basketball Camp. I hereby agree for myself and/or for my minor child as follows:**

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| <ol style="list-style-type: none"> <li>1. I recognize that the A-Train for Youth Basketball Camp will involve various activities that may include but are not limited to instruction, conditioning, practices and games.</li> <li>2. I recognize that there are certain risks of harm to me and others associated with my/my child's participation in the A-Train for Youth Basketball Camp and Camp Activities that there are dangers that cannot be foreseen, that there are risks and dangers that A-Train for Youth Basketball camp and its agents and employees cannot control, and that such risks and dangers could result in bodily injury or death to me/my child and/or others.</li> <li>3. I understand that some of the dangers and inherent risks to me/my child in playing or practicing to play in any sport include, but are not limited to, death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to all bones, joints, ligaments, muscles, tendon, and other parts of the muscular/skeletal system, and serious injury or impairment to other aspects of my/my child's body and general health and well-being. I further understand that there are risks associated with travel and that I/my child could incur some or all of these injuries during travel to and from the A-Train for Youth Basketball Camp.</li> <li>4. I acknowledge that the A-Train for Youth Basketball Camp has strongly recommended to me that I/my child seek medical advice concerning my/my child's physical health, conditioning, and abilities, prior to engaging in and Camp Activities. I further acknowledge that I do not /my child does not have any medical conditions that would affect my/my child's fitness to participate in Camp Activities.</li> <li>5. I agree that if any injury or emergency should occur during Camp Activities with respect to myself/my child, the A-Train for Youth Basketball Camp staff is authorized to take whatever steps are reasonable necessary in their judgment to attend to my/my child's medical needs. I agree to be</li> </ol> | <ol style="list-style-type: none"> <li>responsible for any hospital expenses, doctor bills, or other expenses that may be incurred to attend to my/my child's medical needs.</li> <li>6. I represent that I have/my child has adequate health insurance to cover the cost of treatment in the event of any injury that I incur/my child incurs during the participation in the A-Train for Youth Basketball Camp.</li> <li>7. I agree to assume all risks and responsibility for any and all claims for damages, including personal injury or death, medical expenses, disability, lost wages, loss of earning capacity and property damages which may be incurred by me/my child or which may be made by others and that result in part from my/my child's participation in Camp Activities and/or while engaged in Camp Activities.</li> <li>8. I agree to indemnify and hold harmless A-Train for Youth, their agents and employees, any camp facility and location, their agents and employees, and all other agents of employees otherwise associated with the Camp Activities from any loss liability, damage or costs, including court costs and attorney fees, that they may incur due to my/my child's participation in the A-Train for Youth Basketball Camp, whether caused by my/my child's negligence, the negligence of others and/or by the negligence of the A-Train for Youth Basketball Camp.</li> <li>9. I understand that my/my child's participation fee (if one was paid) is fully non-refundable should I/my child no longer be able to participate in Camp Activities due to health conditions, behavioral conditions, or any other reason the Basketball Camp deems suitable in prohibiting the return and participation in Camp Activities.</li> <li>10. I understand the Camp retains the right to use all photos, Camp film and all other sources of media of me/my child for publicity and advertising purposes.</li> </ol> |
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**In signing this Release, I acknowledge and represent that I have carefully read the foregoing, that I understand it, and that I sign it voluntarily as my own free act and deed. No one has made any oral representation, statements, or inducements in order to get me to sign this document. I have had the opportunity to consult with my own legal counsel before signing this document.**

**I am signing this Agreement on behalf of a minor Participant.**

I acknowledge that I am the Parent/Guardian of the Participant who is less than 18 years of age and that I understand the terms of this Agreement. This Agreement shall be binding upon the Participant and the Participant's parents, guardians, and personal representatives.

\_\_\_\_\_  
Signature of Parent/Guardian for Camp Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Insurance Company

\_\_\_\_\_  
Policy Number

\_\_\_\_\_  
Camp Date

Please mail completed registration form to:

A-Train for Youth  
6095 S. 1300 E. # 337  
Midvale, UT 84047

