





| Name of Participant: | | | | | | |
|--|--------------------------------|--|--|--|--|--|
| Grade: Age: D.O.B Gender: (M/F) Height | t: Weight: | | | | | |
| Address: | | | | | | |
| City: State: Zip Code: | -School: | | | | | |
| Years playing organized basketball: | | | | | | |
| Medical Conditions: | | | | | | |
| Parent (s) or Guardian (s) Name: | | | | | | |
| Primary Phone: Email Address: | | | | | | |
| Jersey Size (Circle One) YS YM YL AS AM AL AXL AXXL AXXXL | | | | | | |
| How did you find out about the Bolt Up Youth Basketball League? | | | | | | |
| *Please Note: Only Jerseys will be provided this season, Participants are responsible for their own shorts. | | | | | | |
| Survey: Available days of the week to practic | e? (Check all days that apply) | | | | | |
| □ Monday □ Tuesday □ Wednesday | □Thursday □Friday | | | | | |
| (Practice once a week at for one hour. Locatio | on TBD by Head Coach) | | | | | |
| Participation Waiver | | | | | | |
| I agree, by signing this form, to indemnify and hold harmless the Bolt Up presented by Marlins Tech Communications, its officials, officers and employees. All claims, actions, causes of action, loss, damage, injury, liability, cost or expense, including without limitation attorneys' fees arising out of, resulting from, or occasioned by participation in any activity associated with Marlins Tech Communications and Bolt Up. | | | | | | |
| Parent Signature: | Date: | | | | | |
| I am willing to participate as a volunteer in support of this program as a: (Please Circle) | | | | | | |
| Head Coach Assistant Coach | | | | | | |
| Name:Phone: | | | | | | |
| Offical Use Only | | | | | | |
| Amount Paid: \$ Payment (Check/MO/Cash): Team Assigned: | | | | | | |
| Receipt #: Date: Staff Name: | Coach: | | | | | |
| Divisions: Have yet to be Determined. | Program Fees | | | | | |
| Cost include game jersey, award, and (Playoff Champions award) | □ \$180.00 (per player) | | | | | |
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Parent's Code of Conduct

We, the Bolt Up Youth Basketball League, have implemented the following Sport Parent Code of Con-duct for the important message it holds about the proper role of parents in supporting their child in sports. Parents should read, understand and sign this form prior to their child(ren) participating in our league. Any parent guilty of improper conduct at any game or practice will be asked to leave the sports facility and be suspended from the following game. Repeat violations may cause a multiple game suspension, or the season forfeiture of the privilege of attending all games.

- I will be responsible for my behavior as well as for the behavior of those who attend the game/practices as my guest.
- I hereby pledge to provide positive support, care, and encouragement for my child participating in youth sports by following this Parent's Code of Ethics Pledge.
- ♦ I will encourage good sportsmanship by demonstrating positive support for all players, coaches, and official at every game, practice or other youth sports events.
- I (and my guests) will not engage in any kind of unsportsmanlike conduct with any official, coach, player, or parent such as booing and taunting; refusing to shake hands; or using profane language or gestures.
- I will be in control of my emotions.
- I will remain in the spectator area during games/practices.
- I will support coaches and official working with my child, in order to encourage a positive and enjoyable experience for all.
- I will remember that the game is for our youth NOT ADULTS
- I will show respect for all participants at all times.
- I will not make insulting comments to players, parents, officials, or coaches of either team.
- I will insist that my child play in a safe and healthy environment.
- I will learn the rules of the game and the policies of the league.

Bolt Up presented by Marlins Tech Communications www.boltup.org 954.546.1002 boltupsummer@gmail.com

| I have read the above Code of Conduct and agree to uphold the agreement. | | |
|--|-------|--|
| Signature: | Date: | |

Bolt Up Basketball League

Presented by Marlins Tech Communications

Assumption of Risk and Waiver of Liability Relating to COVID-19

Assumption of Risk and Waiver of Liability Relating to COVID-19 the novel coronavirus ("COVID-19") has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people. Bolt up presented by Marlins Tech Communications has put in place preventative measures to reduce the spread of COVID-19; however, we cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending the program could increase your child(ren)'s or your risk of contracting COVID-19. By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending the program and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the league may result from the actions, omissions, or negligence of myself and others, including, but not limited to, staff, coaches, volunteers, and program participants and their families. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at the summer program or participation in programming ("Claims"). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless Marlins Tech Communications LLC, and all of their current, former, and future employees, representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the Diocese, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any basketball program.

| Signature of Parent/Guardian: | | | |
|---------------------------------|---------|--|-------------|
| Date: | _ | | |
| Print Name of Parent/Guardian: | | | |
| Name of Student Participant(s): | | | |
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Bolt Up Basketball League Photo Release Form

| Photo Release Form | |
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I hereby grant (Bolt Up Basketball League Presented by Marlins Tech Communications) the unrestricted right and permission to use and re-use my likeness in a video and/or photograph in any and all publications, including web sites entries or any other form of electronic or print communication, for Government, educational or non-commercial purposes without payment or any other consideration, in perpetuity. I understand and agree that any materials produced using my likeness are the property of (your school name here) and will not be provided to me.

I further hereby irrevocably authorize (Bolt Up Basketball League Presented by Marlins Tech Communications) to crop, edit, otherwise alter, copy, exhibit, publish or distribute this photograph for any lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph.

I hereby hold harmless and release and forever discharge (Bolt Up Basketball League Presented by Marlins Tech Communications) from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I am 18 years of age or older and am competent to contract in my own name. I have read this release before signing below and I fully understand the contents, meaning, and impact of this release. I agree to indemnify and hold (your school name here) harmless for any and all losses, claims, expenses, suits, cost, demands and damages or liabilities on account of personal injury, death, or property damages of any nature whatsoever and by whosoever made, arising out of the photographed activities in which I am taking part.

| Signature | Printed Name | Date | |
|-----------|--------------|----------|--|
| Address | | | |
| City | State | Zip Code | |
| Phone | Email | | |