Agree that prior to participating, they will inspect the facilities and equipment to be used, and if they believe anything is unsafe, they will immediately advise the coach or supervisor of such conditions and refuse to participate.

Agree that the parent(s) or legal guardian(s) will instruct the minors (players listed on the reverse side of this form, hereinafter referred to as a team participating that prior to participating, he or she should inspect the facilities and equipment to be used and if the participant believes anything is unsafe, they will immediately advise his or her coach or supervisor of such conditions and refuse to participate.

Acknowledge and fully understand that each team member and each organization participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inaction, or negligence of others, the rules of play, or the conditions of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.

Intending to be legally bound, do hereby release, waive, discharge and covenant not to sue the Tri-County Youth Basketball Conference, Madison Area Technical College, its affiliated organizations, their respective administrators, officers, directors, agents, and other employees and volunteers of the organization, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event, all of which are hereinafter referred to as a release, from any and all liability to each of the undersigned, his or her heirs and next of kin for any claims, demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasee or otherwise in connection with association or participation in and/or arising out of my travel/my team’s travel/my organization’s travel to, participation in and returning from participation in the Tri-County Youth Basketball Conference activities and games.

In the event that I or any members of my team and/or organization sustain injury or illness while participating in the Tri-County Youth Basketball Conference activities, I hereby acknowledge I have secured authorization to apply any emergency first aid, medication, medical treatment or surgery deemed necessary by licensed medical personnel. I have also secured permission for attending personnel to execute on my behalf/my team’s behalf/my organization’s behalf permission forms or other necessary medical documents and to act in my behalf/my team’s behalf/my organization’s behalf if I am not immediately available to do so.

- The Tri-County Conference will not tolerate harassment, taunting, profanity, or racial comments directed towards coaches, players, officials, scorers, timers, or spectators. People found in violation of this policy will be subject to discipline by the Tri-County Commissioner.
- If a coach is tossed out of a game for 2 unsportsmanlike technical fouls – they are on double secret probation. Must talk to Community Rep prior to next game. If it happens a 2nd time, they cannot attend the next 2 games.

THE UNDERSIGNED HAS READ THE ABOVE WAIVER AND RELEASE, UNDERSTANDS THAT HE/SHE GIVES UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGNS IT VOLUNTARILY.

COACH: I have read this release and I am authorized to sign for:

Print Team Name: _____________________
Print Coach’s Name: ____________________
Coach’s Signature: ____________________

COMMUNITY REPRESENTATIVE: I have read this release and I am authorized to sign for:

Print Community Name: ______________________
Print Representative’s Name: ______________________
Representative’s Signature: ______________________

Team entry will not be accepted unless release and waiver form is signed.

In the event of injury, the athlete must pay for all medical costs.