

# OPEN GYM BASKETBALL INFORMATION FORM

COMPLETE ALL INFORMATION. OK TO PHOTOCOPY. PRINT NEATLY USING CAPITAL LETTERS.

## PARTICIPANT CONTACT INFORMATION

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_  
 \_\_\_\_\_  
 MAILING ADDRESS \_\_\_\_\_  
 \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 \_\_\_\_\_  
 RESIDENT STATUS (CIRCLE ONE) RESIDENT NON-RESIDENT D.O.B. (MM/DD/YY) \_\_\_\_/\_\_\_\_/\_\_\_\_  
 HOME PHONE # \_\_\_\_\_ MOBILE/WORK PHONE # (PLEASE CIRCLE ONE)  
 (\_\_\_\_)\_\_\_\_-\_\_\_\_ E-MAIL ADDRESS (PARENT/ GUARDIANS)  
 \_\_\_\_\_  
 EMERGENCY PHONE # \_\_\_\_\_

CHECK HERE TO BE REMOVED FROM OUR REC NET E-NEWSLETTER

## EMERGENCY CONTACT INFORMATION

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_  
 \_\_\_\_\_  
 HOME PHONE # \_\_\_\_\_ ALTERNATE PHONE # \_\_\_\_\_  
 (\_\_\_\_)\_\_\_\_-\_\_\_\_  
 RELATION TO PARTICIPANT \_\_\_\_\_  
 \_\_\_\_\_

### OPEN GYM BASKETBALL RULES

1. Each Participant must have a signed waiver and rules form in order to play. Must pay \$1 at time of arrival.
  2. The Site Supervisor has final decision on all disputes.
  3. You cannot sign up for another game until your current game has completed.
  4. You cannot sign up for other players. All players must sign their own name.
  5. You must sign your name legibly; failure to do so will result in loss of play.
  6. No hanging on the rims or any other actions that may damage equipment. Failure to comply may result in suspension of playing privileges.
  7. Players will call their own fouls.
  8. Excessive fouls will result in forfeiture of currently game and possible suspension of playing privileges. To be determined by Site Supervisor.
  9. First game will be played to 15 straight. All other games will be played to 11 (win by two) with a cap of 17. (1s & 2s)
  10. Winners play on; all others must sign up the next open spot on wait list to continue. There is a maximum three (3) games in a row for winners. At that point they must leave the court and sign the wait list again to continue playing.
  11. If you're not present when your game is scheduled to begin you forfeit you spot to play and must sign back in.
  12. RESPECT EACH OTHER'S CALLS!!!
  13. NO EXCESSIVE ARGUING! Failure to adhere will result in forfeiture of current game for both teams and two new teams will begin play. To be determined by Site Supervisor.
  14. NO FIGHTING... Failure to adhere to this rule will result in suspension of participation in all Sanger Parks & Recreation Department programs for a time period of three (3) years. The proper authorities (Sanger Police Department) will also be notified of your involvement in any altercations occurring during your participation in this program.
  15. Have a good time and behave so others can have fun also!
- \* Contact the Recreation Office at 876-6300 x4 for more info.

PLEASE COMPLETE THE WAIVER AND LIABILITY RELEASE ON REVERSE

**WAIVER AND LIABILITY RELEASE  
OPEN GYM BASKETBALL  
CITY OF SANGER  
RECREATION & COMMUNITY SERVICES DEPARTMENT**

**I, THE UNDERSIGNED, AM AWARE THAT SERIOUS ACCIDENTS OCCASIONALLY OCCUR DURING OPEN GYM ACTIVITIES, AND THAT PARTICIPANTS OCCASIONALLY SUSTAIN PERSONAL INJURY OR DEATH AND/OR PROPERTY DAMAGE, AS A CONSEQUENCE THEREFORE.** I understand that included among the dangerous elements of the sport of Basketball, is the risk of injury as a result of being struck by another player or equipment. I understand that there is a risk of injury to ankles, knees, and legs, along with other parts of the body due to running, jumping, quick and abrupt starts and stops, and that the basketball court and surrounding areas of the court cannot be ensured to be free of defects, and that there is the risk of injury as a result of tripping on an unknown hazard on or nearby the court itself. I understand that in addition to the above-mentioned risks, there are unpredictable dangers involved in this sport. **I HEREBY ASSUME THESE RISKS OF PARTICIPATION IN THE OPEN GYM PROGRAM**

*PLEASE INITIAL* \_\_\_\_\_

In return for allowing my participation, I hereby waive, release and discharge any and all claims for damages for death, personal injury, disability or property damage of any kind which may hereafter accrue to me as a result of my participation in this activity. This release is expressly intended to discharge in advance the City of Sanger and its employees, agent and volunteers from and against all liability arising our of connected in any way with my participation in this activity. **THIS RELEASE WILL APPLY EVEN THOUGH LIABILITY MAY ARISE OUT OF NEGLIGENCE OR CARELESSNESS ON THE PART OF THOSE DISCHARGED INCLUDING THEIR EMPLOYEES, AGENTS AND VOLUNTEERS.**

I further agree to indemnify and hold harmless the entities and persons herein released from any and all claims made by other individuals or entities as a result any actions during my participation in this event.

This Waiver and Liability Release shall apply to me, as well as any of our heirs, executors or administrators.

By my signature below, I hereby certify and acknowledge that I have read this document and understand each and every paragraph contained in this waiver. I am aware that this is a full release of liability on behalf of the City of Sanger as described above and sign it of my own free will.

\_\_\_\_\_  
*Signature of Participant*

\_\_\_\_\_  
*Date*