**FYBBC**

**Waiver of Liability Agreement**

In consideration of being able to participate in the Franklin Youth Basketball Club hereafter referred to as the FYBBC, the undersigned parent/guardian, personal representatives, heirs, and next of kin agree to release and hold harmless the FYBBC, its representatives, the Board of Directors, agents, volunteers, employees, and coaches from all liability for any claims, including negligence, resulting from participation in any and all FYBBC related activities. I understand the same release of liability state above also pertains to the Franklin Public School District, Indian COmmunity School, and any other individual or organization providing services or facilities associated with FYBBC activities.

As a parent or legal guardian of the participant listed below, I authorize my son to participate in the FYBBC program. Any illness or injuries resulting from participation in the FYBBC program are my responsibility. Participation in the FYBBC is voluntary. The undersigned recognizes there are inherent dangers associated with any activities. The undersigned participant may be exposed to such dangers and hereby assumes full responsibility for any risk of bodily injury, death, or property damage arising out of or related to the program. The undersigned also hereby certifies that the participant named below is in good health and has no physical impairment, injury, or illness that will make participation by the undersigned dangerous to himself or others. I, as parent/guardian of participante, hereby waive my right to bargain over terms of this waiver of liability.

In the event of illness or injury, I authorize representatives of the FYBBC to obtain medical treatment for the participant listed below. I further acknowledge that I will responsible for any and all medical and related bills that may be incurred on behalf of the participant for any illness or injury that the participant may sustain related to, or during, the FYBBC program.

The undersigned, parent or guardian, has read this release and waiver of liability, assumption of risk agreement and fully understands its terms, and has signed it freely and voluntarily without any inducement, assurance or guarantee being made to him/her and intends his/her signature to be complete and unconditional release of all liability tot the greatest extent of the law and further agrees that no oral representation, statements or inducements apart from the forgoing written agreement have been made.

Participant Name (Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, State: \_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_

School Attending in Fall: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Name (Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_