

**Basketball K-2nd Grade 2024 Waiver**

Participant Name: \_\_\_\_\_ D.O. B: \_\_\_\_\_ Gender: \_\_\_\_\_

School Name: \_\_\_\_\_ Current Grade: \_\_\_\_\_

Parent or Guardian Information:

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

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Parent or Guardian Information

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

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Alternate Chaperone: \_\_\_\_\_ Relationship: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Please initial all sections below:

I give permission for my child (listed above) to participate in Sanbornton Recreation Programs (Basketball). I assume all risks and hazards incidental to such participation and do hereby waive, release, absolve, indemnify, and agree to hold harmless Sanbornton Recreation Commission, its members, the program instructors, the Town of Sanbornton, and its officials.

In case of accident, I request the Sanbornton Recreation Commission or any of its representatives to contact me. If I am not available, call the Physician named below and follow his/her instructions. If it is impossible to contact this physician and it is an emergency, I hereby authorize any treatment deemed necessary for my child.

Physician Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Please list any medical conditions/allergies that we should be aware of:

\_\_\_\_\_  
\_\_\_\_\_

I give the Sanbornton Recreation Program permission to photograph my child. Photos can be used for Sanbornton Rec's social media pages; Instagram and/or Facebook.

By signing below, I confirm that I have read and understand all of the information in this document.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For office personnel, only: Name: _____ Date: _____ 2023/2024
K-2 <sup>nd</sup> grade: <input type="checkbox"/> Resident Individual: \$30 <input type="checkbox"/> Family \$45
<input type="checkbox"/> Non- Resident Individual: \$40 <input type="checkbox"/> Family \$55
<input type="checkbox"/> Cash Payment \$ _____ <input type="checkbox"/> Receipt # _____ <input type="checkbox"/> Check Payment: \$ _____ Check #: _____