

## Liability and Medical Release

By my agreement below, as a coach and/or guardian I give consent for my players to participate in the Gym Time Hoops events tournaments, along with all related activities.

In case of an emergency, I give the representatives of Gym Time Hoops and, permission to seek medical attention deemed necessary for my players, while they are participating in the Gym Time Hoops Event.

I agree to hold blameless and indemnify Gym Time Hoops, and their sponsors, for all damages other than those covered by the event's Liability and Health Insurance Policy.

Accept Liability/Medical Release

I agree to the Terms and Conditions.

Signature Team Name Date