



## North County 3 on 3 Basketball Tournament November, 18<sup>th</sup> 2017 @ San Marcos High School

**Sponsored by Knights Basketball** 

Cost \$100 per team - Registration deadline: November 11, 2017

Make checks payable to "SMHS ABC"

Bring payment on event day or Mail your entry fee and registration form to:

San Marcos High School
Attn: "Corey Clark"

1615 San Marcos Blvd. San Marcos CA 92078 Any questions contact: corey.clark@smusd.org

\*Rules and schedules will be posted by: November 14<sup>th</sup> via email or on www.smbasketball.com

Guaranteed 3 Games Minimum with start time as early as 8am

Tournament includes 6 divisions: Please Circle one

3<sup>rd</sup> & 4<sup>th</sup> Grade Boys

5<sup>th</sup> & 6<sup>th</sup> Grade Boys

5<sup>th</sup> & 6<sup>th</sup> Grade Girls

7<sup>th</sup> & 8<sup>th</sup> Grade Boys 7<sup>th</sup> & 8<sup>th</sup> Grade Girls

\*The Tournament reserves the right to realign the divisions based on the amount of teams that register Please fill out 3 on 3 Tournament – "Google Registration Form"

Team Name:	
Team Captain's Parents Name:	
Team Captain's Parents Email:	_
Team Captain's Parents Phone:	_

Teams may have up to 4 players (1 Registration per Team)

Player Name	Phone Number	Grade	Email

<sup>&</sup>quot;Distribution of this flyer does not imply endorsement by the San Marcos Unified School District and is in compliance with federal and state law."

## VOLUNTARY ACTIVITY PARTICIPATION FORM ACKNOWLEDGMENT AND ASSUMPTION OF POTENTIAL RISK

I understand and acknowledge that these activities, by their very nature, pose the potential risk of serious injury/illness to individuals who participate in such activities.

I understand and acknowledge that some of the injuries/illnesses, which may result from participating in these activities, include, but are not limited to, the following:

Sprains/strains
 Paralysis
 Fractured bones
 Loss of eyesight
 Unconsciousness
 Head and/or back injuries
 Death

I understand voluntary and as such is not required by the District, and acknowledge that participation in these activities is completely

I understand and acknowledge that in order to participate in these activities, I agree to assume liability and responsibility for any and all potential risks, which may be associated with participation in such activities.

I understand, acknowledge, and agree that the District, its employees, officers, agents, or volunteers shall not be liable for any injury/illness suffered by me which is incident to and/or associated with preparing for and/or participating in this activity.

I acknowledge that I have carefully read this **VOLUNTARY ACTIVITIES PARTICIPATION FORM** and that I understand and agree to its terms.

## ALL PLAYERS AND A PARENT/GUARDIAN FOR EACH PLAYER MUST SIGN THIS WAIVER

The player attending the San Marcos Knights 3 on 3 basketball tournament and in using any gym facility, does so at his/her own risk. The San Marcos Knights 3 on 3 basketball tournament and its staff shall not be liable for any damage arising from personal injury sustained by the camper during the tournament or at the facilities. The player and his/her parents assume full responsibility for any damages or injuries which may occur to the player during the tournament and so hereby fully and forever exonerate and discharge the San Marcos Knights 3 on 3 basketball tournament, the SMUSD Public School District, its staff, and employees from any and all claims, demands, damages, right of action or causes of action, present or future, whether the same be known, anticipated, or unanticipated, resulting from or arising out of the player's participation in the tournament and in the use of the facilities.

I/We hereby certify that to the best of our knowledge our son/daughter is in good physical condition and has no disease or injury that would impair his/her performance in training or competition. Also I/we hereby consent to the participation of our son/daughter in the San Marcos Knights 3 on 3 basketball tournament.

I Give SMHS permission to use my son/daughter pictures on the website or promotional information.

Player's #1 Name:	Date:
Parent/Guardian Signature:	Date:
Dlaver's #2 Names	Data
Player's #2 Name:	Date:
Parent/Guardian Signature:	Date:
Dlavor's #2 Name	Data
Player's #3 Name:	Date:
Parent/Guardian Signature:	Date:
Player's #4 Name:	Date:
Parent/Guardian Signature:	Date:

This signed **VOLUNTARY ACTIVITIES PARTICIPATION FORM** must be on file with the District before a student will be allowed to participate in the above activities.