



FUTURE WARRIORS DRIBBLING CLUB

2016-17 APPLICATION

Include \$25 cash or check payable to Scottsburg Boys Basketball and completed application.

Player's Name _____

Parent's names _____

Address _____

Email _____

Cell Phone _____

School attending fall 2016 _____

Grade _____ Birthday _____ Height _____ Weight _____

Please list any of the following that personnel should be aware of. (Please use additional pages as necessary):

Medications _____

Conditions _____

Restrictions _____

Allergies _____

Waiver/Disclaimer

Scott County School District 2 is not responsible for lost or stolen property. Participation in the sports camp and related activities is at the sole discretion and judgement of the participants and at their own risk. The participant and the participant's parent or guardian assumes full responsibility for any injuries or damages that may occur. The participant and the participant's parent or guardian hereby release and agree to hold harmless Scott County School District 2 and its employees from all claims, actions, damages, and liabilities for personal injury or damage relating to or arising out of any sports camp activity except where the injury or damage is caused by the gross negligence of the school's employees.

Signature of Parent or Guardian _____

Date _____