



PARTICIPANT REGISTRATION FORM

PARTICIPANT INFORMATION

First Name: _____ Last Name: _____

Date of Birth: _____ Gender: Male Female

Age: _____ Years with SNYB: _____ Jersey: Youth _____ Adult _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Please note any medical conditions the club/organization should be aware of:

PARENT/GUARDIAN INFORMATION

First Name: _____ Last Name: _____

Day Phone: _____ Night Phone: _____

Email: _____ Preferred Language: _____

Emergency Contact: _____ Emergency Phone: _____

By registering with SNYB and providing Canada Basketball and/or your provincial basketball association with the personal information of yourself or your child/ward, you are hereby authorizing Canada Basketball and its member provincial associations to collect, store, share, and use that information for the following purposes:

- A) To allow Canada Basketball and its member provincial associations to manage ongoing media relations, evaluate, maintain, monitor, and improve programs to provide you with offers, promotional materials, and other marketing information about our programs and services;
- B) To promote, communicate, and market products, programs, and services from Canada Basketball, its member provincial associations, and their various sponsors and partners.

No, I would like to opt-out of receiving all such communication and information from Canada Basketball and my provincial association.

SNYB Waiver & Release of Liability

In consideration of being permitted to participate in SNYB programming and related activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from activities involved in SNYB is significant, and while rules, equipment, and personal discipline may reduce this risk, the risk does exist;
2. I knowingly and freely assume that all such risks, known and unknown, even if arising from the negligence of Canada Basketball, referees, volunteers, and/or employees, players, sponsors, advertisers, and if applicable, owners/lessors of premises used, and any related events and/or activities (the releasee(s)), and assume full responsibility for my participation;
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately;
4. I, for myself and on behalf of my heirs, assigns, personal representatives, and next of kin, hereby release and hold harmless the releases, with respect to any and all injury, disability, loss or damage to person or property, whether caused by the negligence of the releasee(s) or otherwise;
5. I further agree to irrevocably grant Canada Basketball, and their affiliated Provincial/Territorial Sports Organizations or assigns, the perpetual unlimited world-wide and royally free rights to record, reproduce, broadcast, exhibit, publish, sell, distribute, or use in any way whatsoever my name and likeness in any media, whether now known or hereafter developed, in connection with my attendance and participation in the SNYB program, including without limitation a videotape recording of such performance. I agree that I shall have no claim, title, or interest in my attendance or participation or any materials produced hereunder.

This is to certify that I, as parent/guardian with legal responsibility for this participant, consent and agree to his/her release as provided by all of releasee(s), and for myself, my heirs, assigns, and next of kin, I have read this waiver and release of liability. I fully understand its terms and agree to indemnify the releasee(s) from any and all liabilities to my minor child's involvement or participation in the program as provided above. Also, I confirm that the above information is true and correct to the best of my knowledge.

Signature: _____

Date: _____

