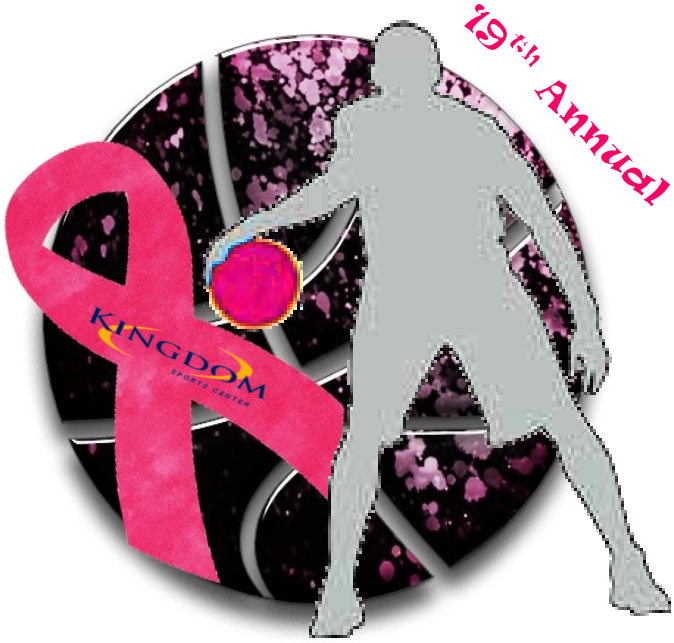
2020

PLAY 4 PINK

19th Annual



BASKETBALL TOURNAMENT

WHEN: April 3rd-5th, 2020

FORMAT: 3+ Game Guarantee

DIVISION: Boys & Girls 3rd Grade - High School

WHERE: Kingdom Sports Center (937)746.3370
440 Watkins Glen D. Franklin, Ohio 45005

COST: $250.00 Per Team

www.kingdomsportscenter.com

- NOTE: **Price includes Ref. Fees. Registration Fee is due at Registration Deadline or your team will not be added to the schedule****

DEADLINE: March 27th, 2020 OR Sell Out – whichever comes first

Team Gender: ( ) Boys ( ) Girls

Team Division: ( ) Upper ( ) Lower

Select Grade Below

( ) 3rd ( ) 4th ( ) 5th ( ) 6th ( ) 7th ( ) 8th ( ) 9th ( ) HS (10th-12th)

MUST CALL TO REGISTER: 937-746-3370

Team Name: _____ **Coach Name:** _____

***Cell Phone: (_____)** _____ **Email:** _____

Waiver/Exclusion Clause (please read carefully and sign below)

I, the parent or guardian or Coach or participant, in registering at Kingdom Sports Center, Inc., understand that he/she/I in attending the indoor Sports program and using the facilities does so at his/her/my own risk. Kingdom Sports Center, Inc., Warren County, OH, and its/their owners, employees and agents, shall not be liable for any damages whatsoever arising from any personal injury or property loss sustained by participant and his/her/my family in or about any programs on the premises. I acknowledge that I am aware of the risks inherent in participating in indoor basketball (both practice and competition); that indoor basketball is a physical sport which can require considerable running, starting, stopping and physical exertion; and could potentially lead to limb injuries; possible permanent disability and death. Participants and parents assume full responsibility for all injuries and damages which may occur in or about any programs on the premises and he/she/I do or does hereby fully and forever release, discharge and hold harmless Kingdom Sports Center, Inc., Warren County, OH, all associated facilities and its/their owners, employees and agents from any and all claims, demands, damages, rights of action, present or future resulting from or arising out of any person's participation in any programs or use of its facilities. In addition, he/she/I agree(s) to the following rules of play and conduct set by Kingdom Sports Center, Inc. He/she/I understand(s) that failure to do so may result in suspension from participation. Also, I waiver all rights to any photos or live video taken during practice or competitions for use in any Kingdom Sports Center, Inc. publication. By Coach signing off on team he/she takes full responsibility of each player on Roster with the above statement in protecting the KSC if he/she does not turn in their Roster of players to the KSC.

Coach Signature: _____ **Date:** _____

*** Please include a Kingdom roster before 1st game with all players parent's signatures No team will be allowed to play without a completed kingdom**

***Please note that if you have a request that request needs to be on this form on or before Deadline. Request may or may not be met. We WILL NOT accept requests for Sunday games due to playoffs. ALL teams must have a coach 18 yrs. Old and older sitting the bench each game or team will forfeit that game.**

REQUESTS:

For Office Use Only: Amount Pd. $ _____ Amount Owed. $ _____ Cash _____ Check # _____

VISA/MC Exp. Code # Zip Employee Initials Date