

MUSLIMBALL.COM

RELEASE FORM

\$50 registration fee will be collected at tryouts. See schedule on MuslimBball.com for tryout dates and times.

PLAYERS MUST ATTEND TRYOUT.

A signed copy of this form along with a copy of the child's birth certificate to verify age will be required at when you attend tryouts.

Insurance: It is the responsibility of every individual, their parent or legal guardian, to provide for their own accident and health coverage while participating in all youth activities. This organization does not provide any such coverage for its participants.

AUTHORIZATIONS and RELEASE:

Photograph Permission: I give permission for the muslimball.com to use any pictures of my child for future promotional purposes.

Medical Treatment: I hereby give permission for my child to be given cardiopulmonary resuscitation (CPR) and first aid treatment by a qualified staff member of the MUSLIMBALL.COM. In the event I cannot be contacted, I also give permission for my child to be transported by ambulance or aid car to an emergency center for treatment. I further consent to the disclosure of health information and to the medical, surgical and hospital care treatment and procedures (including, but not limited to, administration of necessary anesthetics, tests, x-ray examinations, transfusions, injections, drugs) to be performed for my child by a licensed physician or hospital selected by the MUSLIMBALL.COM director when deemed immediately necessary or advisable by the physician to safeguard my child's health.

Release from Liability: Recognizing that the MUSLIMBALL.COM will do its best to ensure a safe experience, I understand that accidents may occur both from my child's participation in youth sports activities and from transportation to and from the program. I agree to assume these risks. By signing below, I release the ISGH & MUSLIMBALL.COM and its employees, volunteers, independent contractors, directors and agents from all liability based on any damage, loss or injury whether it is the result of ordinary negligence or otherwise, caused to my child or to me, from participation in the youth sports program.

I have read and understand the above and have completed this form to the best of my ability. The participant and the parent will abide by all Islamic values and morals. There will be a zero tolerance policy for non-compliance of any un-islamic behavior. Any violation of such may result in a termination of the participant from the league without reimbursement. I also support the MUSLIMBALL.COM youth sports philosophy, which is based on participation, fun, physical fitness and health, skill development, teamwork, fair play, family involvement and volunteer leadership.

Parent Signature _____

Parent Printed
Name _____

Date _____

Participant
Signature _____

Participant Printed
Name _____

Date _____