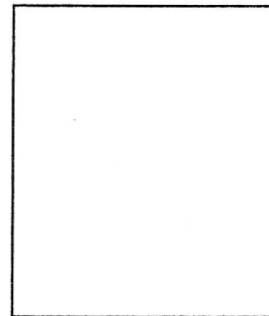




Filipino Basketball Association of Durham

Registration & Waiver Form



Passport Size Photo

PERSONAL INFORMATION:

FULL NAME: _____ / _____ / _____
(Last) (First) (Middle)

ADDRESS: _____
Street & No. City Postal Code

D.O.B. (MM/DD/YYYY) _____ Place of Birth _____

Home Tel. No. _____ Cell No. _____ E-mail _____

OHIP No. _____

School: _____ Grade: _____

Club/Team: _____ Division: _____

PARENT'S/GUARDIAN'S FULL NAME: _____
(for under 18 years old participants only)

Home Tel. No. _____ Cell No. _____ E-mail _____

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In consideration of acceptance for playing in the FILIPINO BASKETBALL ASSOCIATION OF DURHAM tournament/events and intending to be legally bound, I do hereby for myself, my heirs, administrators, representatives and assignees, waive and forever release FILIPINO BASKETBALL ASSOCIATION OF DURHAM and all its officials, organizers, volunteers and members from any claims for damages or personal injury arising from such participation and use of FILIPINO BASKETBALL ASSOCIATION OF DURHAM facilities and equipments during the said tournament/events. I accept full responsibility for all damages and loss of my personal property and effects. In the event of injury, I do give my permission and consent to authorize first aid/medical/hospital care as deemed appropriate. I have read and fully understand and agree to the above waiver. I promise to comply with all the rules and regulations of the tournament, doing otherwise, will subject myself and/or my underage siblings to terminate participation to the said event. As a player or parent/guardian of a minor participant, I/We fully read and understand the full release of waiver to FILIPINO BASKETBALL ASSOCIATION OF DURHAM and all its organizers.

Participant's Signature: _____ Date: _____

Parent's/Guardian Signature: _____ Date: _____
(if under 18 years old)