

# Advantage Basketball Camps

P.O. Box 1344 Lynnwood WA 98046-1344 (425) 670-8877

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Web site - @ [www.advantagebasketball.com](http://www.advantagebasketball.com)

E-mail – info@advantagebasketball.com



## Advantage Basketball release waiver.

### WAIVER, RELEASE, ASSUMPTION OF RISK

I understand that my participation in AAU, Hummel Enterprises Inc., Advantage Basketball, or Washington Girls Select Basketball involves Risk and dangers of serious and permanent bodily injury and death. I, or my parent/guardian if I am a minor, hereby release, hold harmless, discharge and agree not to sue AAU, Hummel Enterprises Inc, Advantage Basketball, Michael Hummel, Washington Girls Basketball Coaches, Officials, Volunteers, Agents, Sponsors, Advertisers, Owners/Leasers of Premises for all liability from my participation in these and any other related travel, lodging, social/recreational activities. I also understand Hummel Enterprises Inc., Advantage Basketball, or Washington Girls Select Basketball retains the right to use for publicity and advertising, photographs and video taken of the participants.

### Medical Release

I have given my daughter/ son permission to participate in the Advantage Basketball events, and I certify that she/he is in good health and can take part in all camp activities. If an injury occurs, I authorize the camp staff members to take all proper action and use the emergency service available at the nearest hospital if necessary. I understand my personal insurance will be used in this case. In case of an emergency, I authorize the personnel to take action.

Participant's name: \_\_\_\_\_

Parent / guardian signature: \_\_\_\_\_

Home phone #: \_\_\_\_\_

Cell phone #: \_\_\_\_\_

Work phone #: \_\_\_\_\_

**Bring this signed form to the first day of camp. (DO NOT MAIL IT)  
Each camper must have a signed copy with them at camp**