



Rebecca Moran, CMAA ~ Director of Athletics  
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**Inaugural Argonaut Alumni Basketball Game**  
**January 12, 2018 at 5:00 p.m.**  
**Registration Fee - \$15**  
**Registration Deadline: December 1, 2017**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Position: \_\_\_\_\_ Jersey #: 1<sup>st</sup> Choice: \_\_\_\_\_ 2<sup>nd</sup> Choice: \_\_\_\_\_ Class of: \_\_\_\_\_

T-shirt Size: S M L XL XXL

**HOLD HARMLESS AGREEMENT**

I, \_\_\_\_\_ hereby expressly consent and agree that **Argo Community High School District 217**, its Board of Education or its members, officers, employees, agents, volunteers or any other person in connection with this activity, hereinafter referred to collectively as “**Argo Community High School District 217**,” shall not be liable for any damages arising from personal injuries sustained by me through participating in this activity. I hereby expressly consent and agree to assume full responsibility for any and all damages or injuries that may occur during the course of this activity.

I agree not to bring any claim, lawsuit or otherwise, against **Argo Community High School District 217**. I further agree to indemnify and hold harmless **Argo Community High School District 217** from any claim, loss, or expense whatsoever, including but not limited to attorneys’ fees, any injury, including death, or other loss that relates to this activity, including any and all claims brought by any other person or third party.

I HEREBY DECLARE THAT I HAVE COMPLETELY READ, FULLY UNDERSTAND, AND VOLUNTARILY ACCEPT THE TERMS OF THIS AGREEMENT.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Signature \_\_\_\_\_

Printed name \_\_\_\_\_

*Please return form and registration fee to Becky Moran, ACHS Athletics,  
7329 W. 63<sup>rd</sup> St., Summit, IL 60501*