National Exposure Tournament Series, LLC 2019 ATHLETE WAIVER/RELEASE FORM

In consideration of being permitted to participate in any way in a National Exposure Tournament Series event in any state, the undersigned:

- 1. Agree and represent that I understand the nature of basketball and that I am qualified, in good health and proper physical condition to participate. I also agree that if at any time I believe conditions to be unsafe, I will discontinue further participation in the National Exposure Tournament Series, LLC event.
- 2. Fully understand that athletic activities involve risks of serious injury, permanent disability, paralysis and death and social losses which might result not only from their actions or negligence, but the actions or negligence of others, the rules of play, or the condition of the tournament site or any of the equipment used. There may be other risks not known or foreseeable at this time.
- 3. Agree the parents or a legal guardian will respect the facilities and equipment to insure proper safety for the minor participants. If anything is believed to be unsafe, a coach or National Exposure Tournament Series official should be notified immediately of such conditions and the participant will refuse to participate.
- 4. Each participant is to be properly insured and/or pay all medical costs in the event of an injury and in the case of emergency must provide a contact person for each minor participant. Furthermore assume all risks and accept personal responsibility for damages following injury, permanent disability or death.
- 5. Release, waive and agree not to sue the National Exposure Tournament Series, LLC, their directors, staff or volunteers, if applicable, owners and teasers of the tournament sites, which are all released from demands, losses or damages on account of injury, death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the release.
- 6. I give my permission for the participants listed below to be used in any National Exposure Tournament Series promotions without compensation.
- 7. This waiver/agreement shall be binding upon the heirs, executors and assignors of all of the undersigned.

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Team Name	Printed Coach's Name	Coach's Signature
		Date:
Printed Participant #1 Name and S	ignature	
		Date:
Printed Parent/Guardian Name an	d Signature of Participant #1	
		Date:
Printed Participant #2 Name and S	ignature	
		Date:

Printed Parent/Guardian Name and Signature of Participant #2

	Date:	
Printed Participant #3 Name and Signature		
	Date:	
Printed Parent/Guardian Name and Signature of Participant #3		
	_Date:	
Printed Participant #4 Name and Signature		
	Date:	
Printed Parent/Guardian Name and Signature of Participant #4		
	_Date:	
Printed Participant #5 Name and Signature		
	Date:	
Printed Parent/Guardian Name and Signature of Participant #5		
	Date:	
Printed Participant #6 Name and Signature		
	Date:	
Printed Parent/Guardian Name and Signature of Participant #6		
	Date:	
Printed Participant #7 Name and Signature		
	Date:	
Printed Parent/Guardian Name and Signature of Participant #7		
	Date:	
Printed Participant #8 Name and Signature		
	Date:	
Printed Parent/Guardian Name and Signature of Participant #8		
	Date:	
Printed Participant #9 Name and Signature		
	Date:	

Printed Parent/Guardian Name and Signature of Participant #9

	Date:
Printed Participant #10 Name and Signature	
	Date:
Printed Parent/Guardian Name and Signature of Participant #10	
	Date:
Printed Participant #11 Name and Signature	
	Date:
Printed Parent/Guardian Name and Signature of Participant #11	
	Date:
Printed Participant #12 Name and Signature	
	Date:
Printed Parent/Guardian Name and Signature of Participant #12	
	Date:
Printed Participant #13 Name and Signature	
	Date:
Printed Parent/Guardian Name and Signature of Participant #13	
	Date:
Printed Participant #14 Name and Signature	
	Date:
Printed Parent/Guardian Name and Signature of Participant #14	
	Date:
Printed Participant #15 Name and Signature	
	Date:
Printed Parent/Guardian Name and Signature of Participant #15	
	Date:
Printed Participant #16 Name and Signature	
	Date:

Printed Parent/Guardian Name and Signature of Participant #16