



2019 Girls Basketball Summer League

June 4, 11, 18, 25, July 2, 9, 16, 23

Waiver Form

Participants Full Name: _____

School: _____ Grade (fall of 2019): _____

Check Appropriate Events & Levels

League Level
(Choose all
that apply)

A

B

C

D

A= varsity A (upper division) B= varsity B C= varsity reserve D= 8th & 9th grade

EMAIL (necessary for confirmation & camp communication): _____

EMERGENCY CONTACT: _____ Cell Phone: _____

SPECIAL NEEDS FOR PARTICIPANT(S): _____

PARENT/GARDIAN SIGNATURE: _____ DATE: _____

WAIVER: Registration implies permission for photos, publicity and inclusion in a participant list unless camp director is notified in writing prior to camp. By signing this form, I agree to hold harmless and indemnify UW-La Crosse, their officers, agents, and employees from any and all liability, loss, damages, costs, or expenses which are sustained, incurred, or required arising out of the actions of my dependent in the course of the camp. I authorize that any medical, surgical, diagnostic and hospital procedures may be performed by a physician on my dependent if I cannot be reached in the event of an emergency.