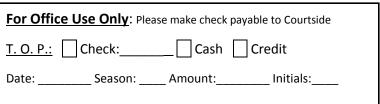


1 diont 2		
Cell/Work:		
Email 1:		
Email 2:		
Grade:		
Game Time Training:		Cost:
Current Grade Leve		
(<u>Circle one</u>)		
$3^{\text{rd}} - 5^{\text{th}}$ Grade Boys and C	Girls	\$65.00
6 th – 8 th Grade Boys and G	Sirls	\$65.00
Shirt Size (Circle One):		
Youth Small	Youth	Medium
Youth Large	Youth	X-Large
Adult Small	Adult l	Medium
Adult Large	Adult 2	X-Large





Agreement, Waiver, & Release:

I, the parent/guardian/participant, in registering with Biagi Sports Enterprises, DBA: Hotshots Youth Basketball League, Courtside Basketball Center, TagTeam Tactics or any other contracted entity understand that he/she/l in attending the event(s) for Courtside Basketball Center, Hotshots Youth Basketball League, TagTeam Tactics and using Courtside Basketball Center does so at his/her/my own risk. I acknowledge that that I am aware of the risks inherent in participating in Sports, ie basketball, or any events held at Courtside Basketball Center; both in practice, competition and in fun: are physical which require, considerable running and physical exertion; and could potentially lead to body harm or limb injuries. Participants and parents assume full responsibility for all injuries and damages which may occur in or at any of the events held at Courtside Basketball Center. He/she/I do or does hereby fully and forever release, discharge or hold harmless Biagi Sports Enterprises, Hotshots Youth Basketball League, Courtside Basketball Center, TagTeam Tactics, contracted entity, organizers, employees, sponsors, and agents from any and all claims, demands, damages, rights of action, property loss, present or future resulting from or arising out of any person's participating. In addition, he/she/I agree(s) to follow rules of play and conduct set by Biagi Sports Enterprises, Hotshots Youth Basketball League, Courtside Basketball Center, TagTeam Tactics, or contracted entity. He/she/I understand(s) that failure to do so may result in suspension from participation and presence on grounds.

I hereby grant Biagi Sports Enterprises permission to use my likeness in any photographs, video, or other representations taken by Biagi Sports Enterprises, their officers, agents, employees, or contractors during the course of the events on the premises of Courtside Basketball Center and Hardwood Palace.

I understand that these photos/videos belong entirely to Biagi Sports Enterprises and may be used by Biagi Sports Enterprises to market their business and events as well as future events that may be developed or hosted by Biagi Sports Enterprises.

I hereby irrevocably authorize Biagi Sports Enterprises to edit, alter, copy, exhibit, publish or distribute photos for purposes of publicizing Biagi Sports Enterprises events or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photos.

I further agree that Biagi Sports Enterprises may copyright or license others to use the photo or any excerpts, and my name and likeness used in or identifying the photos, and in any related or derivative versions of the photos, and in the advertising, marketing and promotion of the photos or Biagi Sports Enterprises in all media.

*I am 18 years of age and am competent to contract in my own name. I have read this release before signing below and I fully understand the contents, meaning, and impact of this release for myself.

*The participant in this event is a minor under the age of 18 and I am the parent or legal guardian of said minor. I have read this release before signing below and I fully understand these contents, meaning, and impact of this release on the minor child.

Courtside Basketball Center has a NO Refund Policy.

Signature:	Date:





EFT Program Enrollment / Change Form

Courtside Basketball Center

Member Name:			
EFT Program members are cocharges placed on account. C	·	•	embership dues and
Billing Name:			
Address:			
City:	State: Ziŗ	o:	
Phone:	SSN #:	·	
Email Address:			
•	r) Information k) I authorize Courtside Bask id other products and servic	· ,	account for all
Form of Payment: Cred	it Card Checking Accou	nt	
Credit Card Information			
Card Number:			
Name on Card:	Expiration:		
Checking Account Information	on (Attach copy of voided c	heck)	
Bank Name:	Phone:		
Route No:			
Account No.:		Send Form To: Co	urtside Basketball Center
		Оре	rations/Member Services
			1104 Tinker Road
Member Signature:		Date:	Rocklin, CA 95765