



THIRTIETH ANNUAL  
**WEST LOS ANGELES YOUTH CLUB**  
**Invitational Scholarship Basketball Tournament**  
 APRIL 20-22, 2018

**Player and Parent  
 Release Waiver**

**Submission Deadline:  
 February 16, 2018**

*This form must be completed and submitted by mail.*

Team Name: \_\_\_\_\_ Division: \_\_\_\_\_

Coach: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Parent Rep: \_\_\_\_\_ Phone Number: \_\_\_\_\_

We, the undersigned, release the West Los Angeles Youth Club, its officers and tournament committee members, team coaches and officials from all liability from, and has obtained insurance for, any injury or loss sustained by the player while playing, practicing, traveling and participating in our tournament. We understand that should we stay at a hotel/motel, we are responsible for the well-being of ourselves and our players.

The signing of this Player-Parent Agreement shall be considered as a waiver of any claim for any such injury or loss and acknowledgment that each player listed below has obtained their own medical insurance coverage for this tournament.

*All players and parents **must** sign this waiver form in order to be eligible to participate in this tournament.*

*This form must be postmarked by February 16, 2018.*

No.	PLAYER'S NAME (PRINT)	PLAYER'S SIGNATURE	PARENT/GUARDIAN PRINTED NAME/SIGNATURE
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

**Submission Deadline is February 16, 2018**