

**Gatlinburg Recreation Department
5 on 5 BASKETBALL LEAGUE 2019/20
Release Form**

(please print)

PARTICIPANT INFORMATION

NAME: _____ **M/F:** _____ **DOB:** ____/____/____

ADDRESS: _____

HOME #: _____ **CELL #:** _____

EMAIL: _____

IN CASE OF EMERGENCY: NAME: _____

PHONE #: _____

RELATIONSHIP: _____

TEAM NAME: _____

LIABILITY WAIVER

I, the undersigned, understand and expressly assume the dangers and risks of any leagues held by the Gatlinburg Recreation Department. I hereby agree to indemnify, save and hold harmless, the City of Gatlinburg, the Gatlinburg Recreation Department, and any other sponsoring agencies or their respective agents, representatives, employees, volunteers, successors or assignees for my health, safety, loss of property or injury resulting from my participation in any city league or sport. To the best of my knowledge, I have no physical restrictions which would prohibit my competing in any physical activity. The Gatlinburg Recreation Department has my permission to have emergency medical personnel attend to me during my participation in the Gatlinburg sports league if it is deemed necessary.

PARTICIPANT SIGNATURE _____ **DATE** _____

LEGAL GUARDIAN (if under 18 years of age) _____ **DATE** _____