

Five-Star Basketball Player Authorization, Injury Waiver, General Release and Emergency Authorization Form

NOTE: This is not a registration form. You must first complete the online registration process to be registered for a Five-Star Basketball Camp. Each camper is required to provide Five-Star with a fully executed copy of this Form at time of check-in. **This Form must be signed by both the Parent/Guardian and Camper.**

The undersigned ("Parent/Guardian"), parent/guardian of _____ ("Camper") and the Camper signing below and participating in the Five-Star Basketball Camp ("Event"), acknowledge that participation in the Event exposes Camper to a possible risk of personal injury. We represent that Camper is physically fit to participate in strenuous athletic activity and hereby release SportsLink – Five-Star, LLC ("Company"), Five-Star Basketball Camp Inc. and their respective officers, directors, employees, agents, licensees, subsidiaries, consultants, independent contractors and affiliates, from any and all liability from personal injuries, recurrence of any disclosed or undisclosed pre-existing injury or illness, property damage or other claims arising from or in connection with Camper's participation in the Event, including claims that are known and unknown, foreseen and unforeseen, future or contingent.

Additionally, Parent/Guardian's signature below constitutes agreement and authorizes treatment for Camper in case of medical emergency.

We, Parent/Guardian and Camper, covenant that we will not now or at any time in the future, directly or indirectly, commence or prosecute any action, suit or other proceeding against the Company and its officers, directors, employees, agents, licensees, subsidiaries, consultants, independent contractors and affiliates, arising out of or relating to the actions, causes of action, claims and demands hereby waived, released or discharged by me.

For good and adequate consideration, which we, Parent/Guardian and Camper, acknowledge has been received, individually and collectively, hereby grant, release, and quitclaim to the Company the right and authority to use, sell, reproduce, and distribute, quoted material, biographical information, Camper's photograph, likeness, recorded voice or videotaped/filmed appearances obtained in connection with the Event (the "Materials") for promotional and advertising purposes or programs as the Company in its sole discretion will deem appropriate.

Parent/Guardian also represents, warrants and agrees that Parent/Guardian is entitled to the care and custody of Camper and is Camper's legal guardian; that during the minority of Camper and for a reasonable time afterwards, Parent/Guardian will use all reasonable efforts to prevent Camper from attempting to or actually disaffirming the agreements the subject of this Form; that Parent/Guardian hereby acknowledges that Parent/Guardian has read the Form and is satisfied that it is fair and equitable for the benefit of Subject; and that Parent/Guardian will not revoke this consent, approval and authorization.

Date: _____

Parent/Guardian Printed Name: _____

Street Address: _____

Parent/Guardian Signature: _____

City, State, Zip: _____

Relationship to Camper: (please print) _____

Camper Printed Name: _____

Camper Social Security # _____ - _____ - _____

Camper Signature: _____

Does your family have medical coverage that includes the Camper? Yes _____ No _____

Policyholder's Name: _____

Telephone No.: _____

Medical Insurance Co: _____

Policy No. _____

Name and Telephone No. of Emergency Contact: _____
(name)

_____ (phone number)

Camper's Immunization's up to date: Yes _____ No _____ *Please attach a list of all allergies to foods or medications*