

**HUSSON HOOPLA 3-on-3 BASKETBALL TOURNAMENT
TEAM ENTRY FORM**

Submit this form, signed by all team members, along with the team entry fee by April 10, 2011.

Team Name: _____ **Amateur Division (\$ 30 per team)** **Team Captain:** _____
 _____ **Open Division (\$ 40 per team)**

WAIVER AND ASSUMPTION OF RISK AGREEMENT

(Please Read Carefully before Signing the Entry Form Below)

In consideration of the acceptance of this entry to participate in the Husson Hoopla 3-on-3 Basketball Tournament, and all related activities; I hereby, for myself, my heirs, executors, administrators, and anyone entitled to act on my behalf; release and discharge Husson University, the event sponsors, and any officials, agents, employees, and volunteers of the event from any and all claims of injury or liabilities of any kind, illness, or damages, suffered by me as a result of my participation in or traveling to or from this event.

I understand that participation in the event is a potentially hazardous activity and that there is significant risk of personal injury that may result from my participation. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, including, but not limited to falls, contact with other participants, and the effects of the weather (including high heat or humidity). I realize that this is a strenuous event which requires proper physical condition and hereby certify that I am in such physical condition and good health.

I agree to abide by all tournament rules, as well as the decisions and instructions of tournament officials. I also give my permission for the free use of my name and picture in any written account, broadcast or telecast of this event for any legitimate purpose.

BY SIGNING THE ENTRY FORM BELOW, EACH PARTICIPANT AFFIRMS THAT HE/SHE HAS READ THIS WAIVER AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTANDS ITS TERMS, UNDERSTANDS THAT HE/SHE HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, and warrants and represents that he/she: (i) is the owner of all rights granted hereunder or has been duly authorized by the owner of such rights to grant same and (ii) is at least eighteen (18) years of age or is the legal parent or guardian of the minor child listed below.

FULL TEAM ROSTER

Maximum of Five Players. Please List Team Captain First (Team Captain MUST Provide Contact Information). Only those individuals appearing on the Full Team Roster may participate.

Player's Full Name	Date of Birth	T-Shirt Size	Email Address	Cell Phone Number	Signature of Player (Parent or Guardian if under 18)
		S M L XL XXL			
1.					
2.					
3.					
4.					
5.					

Submit the ENTRY FORM, with signature of all participants, and the full entry fee by April 10, 2011 to:

Sport Management Professional Development Association, 243 Peabody Hall, Husson University, One College Circle, Bangor, ME, 04401.

REFUND POLICY/ BAD WEATHER POLICY: There will be no refunds granted for any reason. LATE REGISTRATION FEE: \$ 50 per team.