Dale M. Inouye Memorial Basketball Tournament

Second Annual Invitational Tournament

PLAYER MEDICAL & LIABILITY RELEASE AGREEMENT

Team Name:

Coach:

All parents/guardians of players under 18 years old must sign this waiver form in order to be eligible to participate.

Jersey #	Print Player Name	Parent/Guardian Signature	Emergency Phone Number

- The signing of this Player Medical & Liability Release Agreement Form authorizes the DMI Tournament members, its agents, and officers to obtain medical treatment and services for their child when the parent(s) or legal guardian(s) are not present, and the parent(s) or legal guardian(s) agree to pay the fees and costs of such medical treatment and services.
- The signing of this Player Medical & Liability Release Agreement Form holds responsible the parent(s) and or legal guardian(s) and their participating organization for any damages caused by their child or player(s) to the gym sites.
- It is clearly understood by the undersigned applicants that the DMI Tournament committee members, officials, coaches, volunteers and the Cal State University system and Los Angeles Unified School District shall not be liable for any injury or loss sustained by the players while participating in the DMI Tournament held on August 6-7, 2011.

Please submit this signed waiver by the team rep and parents prior to the first game.