



it www.guambasketball.com
for info and forms

TEAM ROSTER

Team Name: _____

Contact Name and Cell #: _____

Age Division: _____

	Uniform #	Player Name	Date of Birth
1			
2			
3			
4			

CONSENT, RELEASE OF LIABILITY AND WAIVER OF CLAIMS

I hereby grant permission for my child, to participate in the 3on3 HotShots tournament.
I acknowledge and understand that this program can be rigorous and may cause injury
through normal participation. Therefore, I hereby release and hold harmless,
the Academy of Computer Arts and Sciences (ACAS), GuamBasketball.com its Employees,
Volunteers, Members, Sponsors, Affiliates and Representatives from any and all claims and/or liabilities
of any kind arising out of his/her participation in this program.

Parent Signature (18 under) - print and sign

Date

1 _____
2 _____
3 _____
4 _____