

PLAYER PARTICIPATION AGREEMENT

Program Name: RGV Hurricanes

Head Coach: _____

Assistant Coach(es): _____

Athlete Name & Jersey Number: _____

Date of Birth: _____

Parent/Guardian Name (if Athlete is under 18): _____

Address: _____

Phone: _____ Email: _____

This Agreement outlines the expectations, responsibilities, and risks associated with participation in the basketball program. By signing this Agreement, the Athlete and Parent/Guardian agree to comply with all terms stated herein.

PRACTICES & TOURNAMENTS

The Athlete agrees to:

- Attend all scheduled practices, conditioning sessions, team meetings, and program-related activities.
- Participate in **monthly tournaments**, which may take place both locally and/or out-of-town.
- Notify coaching staff in advance of any absence when reasonably possible.

The Parent/Guardian understands that tournament schedules may require travel, including overnight stays, transportation, lodging, and meal expenses are the responsibility of the Athlete/Parent unless otherwise stated by the Program.

PLAYING TIME

The Athlete and Parent/Guardian acknowledge and agree:

- All decisions regarding playing time, starting positions, substitutions, and strategy are made at the sole discretion of the coaching staff.
- Decisions are based on effort, attitude, attendance, performance, team needs, and overall program standards. The coaching staff's decisions are final.

CODE OF CONDUCT

The Athlete agrees to:

- Demonstrate good sportsmanship at all times.
- Show respect toward coaches, teammates, officials, opponents, and spectators.
- Refrain from disruptive behavior, including inappropriate language or conduct.

MEDIA & PHOTO RELEASE

The Athlete and Parent/Guardian grant the Program permission to photograph, videotape, and/or record the Athlete during practices, games, tournaments, and related activities. The Athlete and Parent/Guardian authorize the Program to use such photographs, videos, and recordings for lawful promotional purposes, including but not limited to:

- Social media platforms, program websites, promotional flyers, recruiting materials, etc.

The Athlete and Parent/Guardian understand that:

- No compensation will be provided for use of these images or recordings.
- Images and recordings may be used without further notice or approval.
- The Program retains ownership of all media content captured during team activities.

If a Parent/Guardian does not consent to media use, written notice must be provided to the Program prior to participation.

COMMUNICATION POLICY

The Program encourages open and respectful communication.

If there are any questions or concerns regarding playing time, team expectations, scheduling, or other matters, the Athlete and/or Parent/Guardian agrees to contact the coaching staff directly to discuss concerns in a professional manner.

Contact coach via TeamSnap App.

ACKNOWLEDGMENT

By signing below, the Athlete and Parent/Guardian acknowledge that they:

- Have read and understand this Agreement.
- Understand the risks involved in participation.
- Agree to all terms and conditions stated above.

Athlete Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

HURRICANES PLAYER LIABILITY WAIVER

ASSUMPTION OF RISK

The Athlete and Parent/Guardian understand that participation in basketball and related activities involves inherent risks, including but not limited to:

- Sprains, strains, fractures
- Concussions and head injuries
- More serious bodily injury

The Athlete voluntarily assumes all risks associated with participation in the Program.

NO INSURANCE & LIABILITY

The Athlete and Parent/Guardian acknowledge that:

- The gym and/or training facility **does not provide medical or accident insurance coverage** for participants.
- The Program does not provide medical insurance for injuries sustained during practices, tournaments, travel, or related activities.
- All medical expenses are the sole responsibility of the Athlete/Parent/Guardian.

To the fullest extent permitted by law, the Athlete and Parent/Guardian hereby release, waive, discharge, and hold harmless the RGV Hurricanes Program, coaching staff, volunteers, gym owners, facility operators, and affiliated representatives from any and all claims, liabilities, damages, or causes of action arising from participation in the Program, except in cases of gross negligence or intentional misconduct.

MEDICAL AUTHORIZATION

In the event of injury or medical emergency, the coaching staff is authorized to seek emergency medical treatment for the Athlete. The Parent/Guardian assumes full financial responsibility for any medical services rendered.

Emergency Contact Name: _____

Emergency Contact Phone: _____

Known Medical Conditions/Allergies: _____