

**JEFF'S SPORTS CONNECTION - LIABILITY RELEASE FORM**

Child's Name: \_\_\_\_\_ M/F: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name of Parent or Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Alternate: \_\_\_\_\_

E-mail: \_\_\_\_\_

Activity: Recreational Basketball League

Organization: Jeff's Sports Connection aka Jeff's Sports and Specialties – Jeffrey R. Powell

**LIABILITY RELEASE**

I hereby declare that I am the parent or legal guardian of the above-named child and that said minor has my expressed permission to participate in the mentioned activities including but not limited to running, jumping, falling, and other involvements associated with physical activity. Accordingly, for myself and on behalf of said minor, I do hereby forever release and discharge Jeff's Sports Connection, Jeffrey R. Powell, the City of Anaheim, the American Sports Center, the City of Orange, the Super Sports Center, the Tustin Salvation Army, the City of Tustin, Orange High School and Orange Unified School District, and any involved municipalities or other public entities, their employees and all sponsors, producers, agents, representatives, successors, and assigns of all liabilities, claims, actions, damages, costs, or expenses which said minor or I may have against any or all of them arising out of or in any way connected with participation in the above mentioned activity. I understand that this release includes any claims based on negligence, action or inaction of any of the above-named parties.

I further understand that serious accidents may occur during said activity and that participants in such activity occasionally sustain mortal or serious personal injuries, and/or property damage, as a consequence thereof. Knowing the risks of said activity, nevertheless, on behalf of said minor child, I hereby agree to voluntarily assume those risks and to release and hold harmless all of the persons or entities mentioned above who, through negligence or carelessness, might otherwise be liable to me, said minor, or the heirs and assigns of myself and said minor, for damages.

It is further understood and agreed that this waiver, release and assumption of the risk is to be binding on the heirs and assigns of myself and said minor.

I have read and voluntarily signed this liability release and assumption of the risk and I agree to accept and abide by the terms of this agreement.

I agree to accept and abide by the rules and regulations of Jeff's Sports Connection.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

In case of emergency and if unable to contact a parent or guardian, please notify:

\_\_\_\_\_  
(Name, address, phone number(s))

**CONSENT TO TREAT MINOR**

In the event of sudden illness, accident or injury which may occur while said minor is engaged in an activity supervised by Jeff's Sports Connection, Jeffrey R. Powell, the City of Anaheim, the American Sports Center, the City of Orange, the Super Sports Center, the Tustin Salvation Army, the City of Tustin, Orange High School and Orange Unified School District, and any involved municipalities or other public entities, their employees, representatives, agents or assignees, when neither parents, guardian, or designated family physician can be contacted, I hereby authorize emergency treatment pursuant to California Civil Code #25.8 as shall be necessary under the circumstances to be rendered by physician or dentist licensed under the laws of the State of California.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

Family Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance Co.: \_\_\_\_\_ Type of coverage: \_\_\_\_\_

Pertinent medical history information (epilepsy, diabetes, allergies, etc.):

\_\_\_\_\_