Team Name:_____ **Boys or Girls** **Grade:**_____
Tournament:_____ **Tournament Date:**_____

ROSTER/PARTICIPATION AGREEMENT & WAIVER FORM

In consideration of being allowed to participate, each participant and his/her legal representative, WAIVE ALL CLAIMS for injury, accident or loss of any kind AND HEREBY RELEASE S Pay, Inc. D/B/A Blue Star Sports, all facilities, sponsoring organizations, and their respective employees, members, agents, contractors, and representatives from any and all losses, claims, damages, and other liabilities arising from participation in or attending such event. As further consideration of participation, each participant and his/her legal representative consent to S Pay, Inc. D/B/A Blue Star Sports taking photographs or video of participants at event sites. S Pay, Inc. D/B/A Blue Star Sports retains the right to use any such photographs or video for publicity, advertising, or website/social media posts. This Agreement & Waiver apply & extend to any and all events of S Pay, Inc. D/B/A Blue Star Sports, held from 9/01/2017 thru 8/31/2018.

Head Coach: Ass't Coach:

Name and Address	Jersey #	Grade	Parent/Guardian Release & Waiver (signature)

As a duly authorized team representative, I acknowledge, agree and confirm that all team representatives and coaches accept full responsibility for the conduct of team players, coaches, and fans on and off the court and will promote only the best sportsmanship among all of us, win or lose. I further agree that all players, coaches, and fans will be bound by the Rules & Policies of S Pay, Inc. D/B/A Blue Star Sports, and the application of such rules and policies by event management. I affirm and pledge that each of the players listed above is eligible to participate in the selected division as provided in the Player Eligibility Rules for S Pay, Inc. D/B/A Blue Star Sports.

_____ _____ _____
Date Print Name Team Representative (signature)

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