FREE AGENT AGREEMENTS & WAIVERS

Participant Agreement & Release of Liability.

By signing this roster, I am voluntarily choosing to participate in the Hoop Therapy Rx Adult Men's Basketball League and related events and activities. As lawful consideration for permission to participate in the Hoop Therapy Rx Adult Men's Basketball League and related events and activities, and for permission to use Spring Valley Gymnasium and/or City of San Diego Parks and Recreation Deportment.

I agree to release from any legal liability and agree not to sue Hoop Therapy Rx, its officers, directors, agents, employees, volunteers, sponsors, and affiliates, as well as Spring Valley Gymnasium and/or City of San Diego for any and all injuries, including death, or property damage caused by or resulting from my participation in the Hoop Therapy Rx Adult Men's Basketball League and related events and activities. whether or not such injury, death, or property damage was caused by alleged negligence.

Please check or initial the boxes signifying that you agree.

- ☐ I agree that this Agreement and Release of Liability is intended to be as broad and inclusive as permitted by law. Any provision found to be invalid or unenforceable by a court shall not affect the validity or enforceability of any other provision.
- ☐ I agree to inspect the facilities and equipment to be used and accept them "as is." If I believe any facility or equipment to be unsafe, I will immediately notify league staff, management, or a person in charge and refuse to participate until the condition is corrected.
- ☐ I acknowledge that I am aware of the rules and policies of the Hoop Therapy Rx Adult Men's League. I understand that violation of league rules or policies may result in suspension, removal, or other disciplinary action.
- ☐ I understand that I am participating in an amateur recreational basketball league and assume all risks associated with participation.
- ☐ I understand that this contract is legally binding and that I am releasing legal rights by signing it. I am voluntarily signing this agreement, and it is intended to be binding on my heirs, personal representatives, next of kin, and assigns.

FREE AGENT PLAYER ROSTER

Full Name: _____

@Socials: _____

Jersey #: _____

T-Shirt Size: _____ Short Size: _____

Electronic Signature & Binding Agreement

By electronically signing this Free Agent Agreement and Waiver, you acknowledge and agree that your digital signature has the same legal validity and enforceability as a handwritten signature, to the extent permitted by applicable law. By submitting your electronic signature, you confirm that you have read, understood, and voluntarily agree to be bound by all terms, conditions, acknowledgments, and waivers contained in this agreement.

Signature: _____ Date: _____

STAFF ONLY

Team Name: _____ Captain Name: _____

Team Colors: _____ Captain Contact: _____