The Signature League - Team Waiver Form (Insurance Purposes)

Form must be signed by parent/guardian in order for players to be eligible to play. Player are not insured if form is not signed

DATE: _____

TEAM NAME: _____

I hereby authorize my daughter/son to participate in the Signature League powered by NIKE BASKETBALL PROGRAM. I authorize the program organizers to act for me in their best judgment in any emergency requiring medical attention. I hereby agree to save harmless the Signature League Powered by NIKE UPLAY CANADA, MISSISSAUGA MINOR BASKETBALL, it's organizers, sponsors, agents, officials and representatives from all liability however caused in connection with taking part in the Signature League Powered by NIKE.
Also, Signature League Powered by NIKE has my permission to use my daughter/son photograph, video and audio recordings, likeness, artwork, profile and/or story in future publications, web pages and other promotional materials produced, used by and representing Signature League Powered by NIKE.

I understand the circulation of materials could be worldwide and that there will be no compensation to me for this use.

Player Name	Parent Signature