

Henry County Schools Basketball Tournament

March 24-25, 2023

RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

IN CONSIDERATION of being permitted to enter all publicly used gymnasiums and private gymnasiums affiliated with Henry County Schools for any purpose, including but not limited to observation, use of the basketball facilities or any equipment therein, participation in any activities therein, providing and/or receive training or instruction therein, or otherwise undertaking or participating in any way in any activity or event therein, the undersigned, for himself or herself and any personal representatives, dependent minor children, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has or will, each time upon entering the premises, inspect the premises and the equipment and facilities therein. It is further warranted that such entry into the premises constitutes the undersigned's acknowledgment that such premises and all facilities and equipment therein have been inspected and that the undersigned finds and accepts same as being safe and reasonably suited for the purposes of observation or use.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE PREMISES, FOR ANY PURPOSE INCLUDING, BUT NOT LIMITED TO OBSERVATION, USE OF THE BASKETBALL FACILITIES OR ANY EQUIPMENT THEREIN, PARTICIPATION IN ANY ACTIVITIES THEREIN, PROVIDING AND/OR RECEIVING TRAINING OR INSTRUCTION THEREIN, OR OTHERWISE UNDERTAKING OR PARTICIPATING IN ANY WAY IN ANY ACTIVITY OR EVENT THEREIN, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. **THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE HENRY COUNTY SCHOOL** and each of their respective directors, officers, owners, shareholders, trustees, affiliates, employees, successors, assigns, agents, partners, managers, scorekeepers, parent drivers, timekeepers and coaches (hereinafter referred to as "releasees") from all liability to the undersigned, his or her personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releases or otherwise while the undersigned is in, upon or about the Premises, or any facilities or equipment therein.
 0. **THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS** the releases, and each of them, from any loss, liability, damage, or cost including, without limitation, attorney's fees and related litigation costs they may incur due to the presence of the undersigned in, upon, or about the Premises or in any way observing or using any facilities or equipment therein, participating in activities therein, providing and/or receiving training or instruction therein, or otherwise undertaking or participating in any way in any activity therein, whether caused by the negligence of the releasees or otherwise.
 0. **THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE** due to the negligence of releasees or otherwise while in, about, or upon the Premises and/or while observing or using any facilities or equipment therein, participating in activities therein, providing and/or receiving training or instruction therein, or otherwise undertaking or participating in any way in any activity or event therein.
 0. **THE UNDERSIGNED HEREBY ACKNOWLEDGES** that this Waiver, Indemnification and Release of Liability expressly includes transportation provided, arranged, or paid for by Henry County Schools, to and from, or in connection with any activity or event of Henry County Schools in any vehicle, including transportation to and from medical treatment.

THE UNDERSIGNED further expressly agrees that the foregoing RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the laws of the State of Georgia and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT and further agrees that no oral representations, statements, or inducement apart from the foregoing written agreement have been made. READ THIS DOCUMENT IN FULL BEFORE SIGNING. THIS DOCUMENT AFFECTS YOUR RIGHTS.

Child's Printed Name _____

Adult Printed Name: _____

Adult Signature: _____

Executed on, (Date) _____ **2023**

Phone Number: _____

Address: _____

City: _____

State: GA

Zip code: _____

**Henry County Schools Elementary Basketball Tournament
Player Medical Release
Form**

To be completed by Parent or
Guardian

I hereby give permission for any and all medical attention necessary to be administered to my child
(name)_____in the event of accident, injury, sickness, etc., while they are
under the care and supervision of the Henry County Schools employees and staff until such time as I may be
contacted and/or present at the event.

I have also authorized alternate persons to be contacted for guidance. I hereby give permission for treatment
of my child as may be required and determined by the appropriate health care professional who is present.

This release remains in effect annually for the duration of my child's membership with Henry County Schools. I
hereby assume responsibility for payment of such treatment and have attached my child's insurance
information.

Parent/Guardian name: _____

Phone (Primary):_____(Work):_____(Home)_____

Parent/Guardian home address:_____

City:_____State:____Zip:_____

ALTERNATE CONTACT PERSONS: In case I cannot be reached, either of the following is
designated an alternative contact person:

Name:_____Phone:_____Relationship:_____

Name:_____Phone:_____Relationship:_____

My insurance carrier / policy number is: _____

My child's physician:_____Physician's Phone:_____

Physician's Address: _____

Known allergies or medical conditions of child: _____

Medications child takes: _____

Parent/Guardian name (print): _____

Signature: X _____ **Date:** _____