



COLORADO SPRINGS STARS PLAYER INFORMATION SHEET

PLAYER NAME							
ADDRESS							
CITY				STATE		ZIP	
(H) PHONE #				(C) PHONE #			
EMAIL							
BIRTHDATE					AGE		
HEIGHT				CURRENT GRADE			
SHOE SIZE		<small>(Men's Women's)</small>		JERSEY SIZE			SHORT SIZE
SCHOOL					COACH		
ADDRESS							
CITY				STATE		ZIP	
MOTHER				(H) PHONE #			
(C) PHONE #			(W) PHONE #			EMAIL	
FATHER				(H) PHONE #			
(C) PHONE #			(W) PHONE #			EMAIL	
PRIMARY EMAIL FOR ALL COMMUNICATION							
INSURANCE					GROUP #		
PHONE #					POLICY #		
EMERGENCY #1					PHONE #1		
EMERGENCY #2					PHONE #2		
Parent Signature					Date		

Please provide a copy of your Birth Certificate with this Information Sheet



COLORADO SPRINGS STARS MEDICAL RELEASE FORM

As the parent/legal guardian of _____ I request that in my absence the above-named player be admitted to any hospital or medical facility for diagnosis and treatment. I request and authorize physicians, dentists, and staff, duly licensed as Doctors of Medicine or Doctors of Dentistry or other such licensed technicians or nurses, to perform any diagnostic procedures, treatment procedures, operative procedures and x-ray treatment of the above minor. I have not been given a guarantee as to the results of examination or treatment. I authorize the hospital or medical facility to dispose of any specimen or tissue taken from the above-named player.

	Month	/	Day	/	Year		Month	/	Day	/	Year		
Date of Player's Birth		/		/		Date of last Tetanus Booster		/		/			
Known allergies of this player, including any allergies to medicine													
Any other medical problems which should be noted													
Family Physician						Phone							
Name of Parent/Guardian													
Address													
City/State/Zip													
Phone	H					W					C		
Person responsible for charges (if different from above)													
Address													
City/State/Zip													
Phone	H					W					C		
Person to notify if parent/guardian is unavailable													
Address													
City/State/Zip													
Insurance Carrier								Policy Number					
Signature of Parent/Guardian													
Date													



RELEASE OF LIABILITY FOR MINOR PARTICIPANTS READ BEFORE SIGNING

IN CONSIDERATION OF _____ my minor child/ward ("my child"), being allowed to participate in any way in the **COLORADO SPRINGS STARS B-BALL ACADEMY** program, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury to my child from the activities involved in these programs is significant, including the potential for permanent disability and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,

2. FOR MYSELF, SPOUSE, AND CHILD, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my child's participation; and,

3. I willingly agree to comply with the program's stated and customary terms and conditions for participation. If I observe any unusual significant concern in my child's readiness for participation and/or in the program itself, I will remove my child from the participation and bring such attention of the nearest official immediately; and,

4. I myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY RELEASE THE other participants, coaches, volunteers, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my child's involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

5. I, for myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releasees from any and all liabilities incident to my involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

X _____
(PARENT/GUARDIAN SIGNATURE) (PRINT NAME) (DATE)

UNDERSTANDING OF RISK

I understand the seriousness of the risks involved in participating in this program, my personal responsibilities for adhering to rules and regulation, and accept them as a participant.

X _____
(PARTICIPANT SIGNATURE) (PRINT NAME) (DATE)



COLORADO SPRINGS STARS CODE OF CONDUCT

PLAYER _____

In consideration of being a Player, Coach, Parent, or Volunteer in the Colorado Springs STARS Basketball Program, I consent to abide by the rules of conduct set forth herein. I understand that these rules extend to my conduct in all activities and events sanctioned or sponsored by the Colorado Springs STARS to include practices, travel to and from events, tournaments, and overnight stays. I also understand that if I violate any of the following rules, I may be subject to disciplinary action as deemed appropriate by Colorado Springs STARS administration or local law enforcement. Disciplinary actions may include loss of playing time and/or the STARS may send a player home from a tournament at the parent's expense and/or dismissal from the program.

The following actions are prohibited:

1. Illegal transport, possession, or use of drugs or other illegal substances.
2. Physical damage to a facility or theft of items from a room, dormitory, residence or other person. (Restitution will be part of any penalty imposed)
3. Possession of fireworks, ammunition, firearms, other weapons or any item or material which by commonly accepted practices and principles would be a hazard or harmful to other persons.
4. Any action considered to be an offense under Federal, State, or local laws/ordinances.
5. Violation of the specific policies, procedures, and/or regulations of the various School Districts where we practice or participate in tournaments.
6. Conduct which is inappropriate as determined by comparison to normally accepted behavior.
7. Physical or verbal intimidation of any individual.

Parent/Guardian Signature

Player Signature

Date

Date