



Team Releases/Waiver/Liability Overview

Communication

All official team communication will be conducted through the GameChanger app. This includes practice schedules, game times, tournament details, schedule changes, and important team announcements. I will download the GameChanger app, enable notifications, and check it regularly to stay up to date on all team information.

_____ **Parent/Guardian Initials** _____ **Player Initials**

Media Release

I grant permission for photographs and video of my child taken during team activities to be used by the Navarre Wolves program for promotional, educational, or informational purposes, including social media and websites, without compensation.

_____ **Parent/Guardian Initials** _____ **Player Initials**

Emergency Medical Authorization

In the event of an emergency where I cannot be reached, I authorize the Navarre Wolves coaching staff or designated representatives to obtain emergency medical treatment for my child. I understand that I am responsible for any medical expenses incurred.

_____ **Parent/Guardian Initials** _____ **Player Initials**

Florida Youth Sports Liability Waiver & Release

I, the parent or legal guardian of the participant, understand that participation in youth basketball involves inherent risks, including serious injury or death. I voluntarily assume all risks associated with participation, including travel to and from practices, games, and tournaments. To the fullest extent permitted by Florida law, I hereby release and hold harmless the Navarre Wolves program, its coaches, volunteers, tournament directors, facility owners, municipalities, and affiliated organizations from any claims arising from ordinary negligence. This release does not apply to gross negligence or intentional misconduct. I agree to indemnify and hold harmless the released parties from any loss or expense arising from my child's participation.

_____ **Parent/Guardian Initials** _____ **Player Initials**

Parent / Guardian Acknowledgment & Signature

Player Name: _____

Player Signature: _____ Date: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____

Emergency Contact: _____ Phone: _____