

COBRA Optimist Basketball Family Registration & Release Form

<input type="checkbox"/> New Member - \$15
<input type="checkbox"/> Paid thru Other Sport - \$0
<input type="checkbox"/> Additional Sibling - \$0

<input type="checkbox"/> Paid Raffle Tickets - \$15
<input type="checkbox"/> Has Not Paid Yet
Total Paid _____

Name _____ Date of Birth _____ Grade ____ School _____ Shirt Size _____

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Emergency Contact _____ **Emergency Phone Number** _____

Special Medical Conditions (e.g., medications, asthma, allergies) _____

Parents Name(s): _____ Phone: _____

Address: _____ City: _____ St: _____ Zip: _____

EmailAddress: _____

COST OF COBRA BASKETBALL:

It costs \$15 to join COBRA, \$15 for raffle tickets.

All COBRA registration and release forms and fees must be completed before your child can participate in any practice or COBRA function.

PLEDGE TO PARTICIPATE: As the parent or guardian of a COBRA Optimists child, I volunteer to participate in at least one community service activity with my child, and to support the fundraising activities that COBRA Optimists uses to fund youth sports such as helping in the basketball and wrestling tournaments. I understand that COBRA Optimists is an organization for the betterment of the community, which strives through sports to enrich the lives of all children regardless of financial ability.

AGREEMENT: I hereby certify that the child listed above is in normal health and able to participate in the COBRA Optimists (hereinafter "Sponsor") youth program. I assume all risk(s) and hazards incidental to the program and for the transportation to and from the program unless otherwise provided for by the specific program. I hereby indemnify and hold Sponsor harmless from all claims, damages, liabilities (including attorney's fees and legal expenses), causes of actions, actions, suits and other legal proceedings in any matter relating to or arising out of the child's participation in this program. I hereby authorize Sponsor to seek medical aid in the event that parents or guardians cannot be reached in case of emergency. I understand that Sponsor is not responsible for my child past program times.

This parental signature releases COBRA, coaches and volunteers involved from claims (present or future) resulting from any injuries which may occur during COBRA activities. This signature gives us permission to seek emergency medical care as deemed necessary

PARENT OR GUARDIAN SIGNATURE: _____ Date: _____

Make checks payable to COBRA
<http://www.cobraoptimist.org>
(PRIVATE DONATIONS WELCOME AND ARE TAX DEDUCTIBLE)
Cobra Optimist is a 501c3 Organization