



# 3on3

## Holiday Hoopfest

**December 29th**  
**Ferndale**  
**High**  
**School**

**Divisions:**

**Boys 4th – 8th grade**

**Girls 4th – 8th grade**

**Adult Men and Adult Women**

**\$100 / team**

**Each player receives a t-shirt**

*3 game guarantee. Playoff between top teams in each division.*

**reg by 12/16 to guarantee t-shirts**

**Proceeds go to Ferndale Girls Basketball Thank you!**

**Please Make checks payable to:**

**Ferndale Golden Eagles Booster Club (FGEBC)**

**Mail to:**

**Ferndale Golden Eagles Booster Club, 2561 Lakeridge Dr., Ferndale, WA 98248**

**Email – [Mikekarenivy@yahoo.com](mailto:Mikekarenivy@yahoo.com) or**

**[telliskona@icloud.com](mailto:telliskona@icloud.com)**

**text or call:**

**Mike 360-820-1955 or Brenda 360-510-7247**



# Registration Form

You will receive an email confirmation when your registration and waivers have been received. Schedules will be sent out by December 22nd.

Team Name: \_\_\_\_\_

Division/Grade: \_\_\_\_\_

Adult Division just fill in names below thank you.

Player #1: \_\_\_\_\_

Experience: rec      aau

Age/grade: \_\_\_\_\_

Player #2 \_\_\_\_\_

Experience: rec      aau

Age/grade: \_\_\_\_\_

Player #3 \_\_\_\_\_

Experience: rec      aau

Age/grade: \_\_\_\_\_

Player #4 \_\_\_\_\_

Experience: rec      aau

Age/grade: \_\_\_\_\_

## Team Coach/Contact Information

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Coaches please make sure all of your players have signed the Participant Hold Harmless Waiver. Players will not be allowed to participate without one.

### Shirt sizes needed for your team: (4 per team)

Ym \_\_\_\_ Yl \_\_\_\_ Yxl \_\_\_\_ S \_\_\_\_ M \_\_\_\_ L \_\_\_\_ XL \_\_\_\_ XXL \_\_\_\_

**Participant Hold Harmless Waiver**

**Name of Participant:** \_\_\_\_\_

I, (Parent or Participant)\_\_\_\_\_ hereby acknowledge that I or my child have voluntarily chosen to participate in the *Ferndale High School Holiday 3 on 3 Tournament*.

I recognize that any athletic program and its activities involves risk of injury and I agree to accept on my or my child’s behalf, any and all risks associated with it, including, but not limited to, property damage or loss, minor bodily injury, severe bodily injury and death.

In consideration of my or my child’s participation in the program and to the fullest extent permitted by law, I agree to indemnify, defend and hold harmless Ferndale School District, its trustees, officers, directors, employees, agents, volunteers and assigns from and against all claims arising out of or resulting from my participation in the program.

I further understand that this assumption of risk and hold harmless is intended to be as broad and inclusive as permitted by the laws of the State of Washington and that if any portion hereof is held invalid, I agree that the balance shall, notwithstanding, continue in full legal force and effect.

I agree that this acknowledgement of risk and hold harmless is effective for the duration of the program.

I hereby verify the information entered on this form is true and complete.

I have read and understand this acknowledgement of risk and hold harmless.

Participant’s Full Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Participant or Parent/Guardian\_\_\_\_\_

**For Children under 18**

Child’s Name: \_\_\_\_\_

Does your child have any medical needs or medication that we should be aware of during the tournament/camp?

Yes/No – if Yes, please explain: \_\_\_\_\_

\_\_\_\_\_

**All participants under 18 must have a Parent or Guardian sign the following release:**

I hereby authorize the staff of Ferndale School District to act in my absence in case of illness or injury involving my child. Neither I nor my child will hold Ferndale School District, its staff or the tournament/camp volunteers liable for injuries, illness or expenses incurred while my child is at tournament/camp. Medical insurance is the responsibility of the parent/participant.

**Parent/Guardian Name (please print)** \_\_\_\_\_

**Signature**\_\_\_\_\_