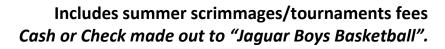
## JAGUAR ATHLETIC CLUB - BOYS BASKETBALL

## **AAU Individual Sport Form**

\$20 AAU FEE



PRINT NEATLY	Grade in School Year 2020-2021
First Name	Last Name
Home #	Players Cell #
Address (Street)	
City	Zip
Height Weig	ht Birthday
Parents/Guardians Names	
Parent Work #	Parent Cell #
Email:	
I understand that my p injury and death. I, or my pare sue AAU of US. Inc., its Club/T Advertisers, Owners/Lessors of F	VAIVER, RELEASE, ASSUMPTION OF RISKS participation in AAU activities involves risks and dangers of serious and permanent bodily not or guardian if I am a minor, hereby release, hold harmless, discharge and agree not to feams, Directors, Officers, Employees, Coaches, Officials, Volunteers, Agents, Sponsors, Premises for all liability from my participation in these and any other AAU liability from my ese and any other AAU related travel, lodging, social/recreational activities.
Parent Signature:	PAYMENT TYPE:
Player Signature:	COLLECTED BY: