

HUMAN RESOURCES AND WELLNESSWORKS
BASKETBALL 3 ON 3 FAMILY TOURNAMENT in support of
Making Strides Against Breast Cancer

Saturday, November 16, 2019 starting at 12 Noon
Tamiami Park – 10901 SW 24 Street

REGISTRATION FORM – Deadline November 1st

MDC Employee information:	
Full name:	
Department & Employee ID#:	
AvMed#:	
Contact telephone Number:	
Email Address:	
Age/Gender:	
Shirt Size:	

MDC Employee family/friend information:	
Full Name:	
Parent/Guardian Name:	
MDC employee's Relationship:	
Contact telephone Number:	
Email Address:	
Age/Gender:	
Shirt Size:	

Team information:	
Team Name:	
Number of Team Players (Max. 5):	
Adult Sponsor Name (If applicable):	

Please complete and submit the Registration Form and Payment as follows:

Registration per Team: \$100 or \$20/player. **Cash or Cash-App (\$IngridMS)**
 Spectator Fee: \$5 donation to **Making Strides**

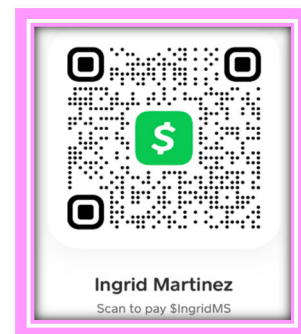
Ingrid Martinez: Ingrid.Martinez@miamidade.gov
 Miami-Dade County Human Resources Department
 111 NW 1st Street, Suite 2110, Miami, Florida 33128-1906
 Phone Number: 305-375-1334

Teams: Maximum of 5 players per team.

Each Team must include or be represented by at least ONE County employee. Complete 1 form for each player on the team.

Adult (co-ed) and Kid's Brackets.

High School, Middle School and Elementary School Divisions must sign-up as a team with an adult sponsor. Minors must have waivers and be accompanied by parent/guardian.



Jerseys and refreshments will be provided to players
Raffles for Miami HEAT tickets and Autographed Basketball planned



Basketball 3 on 3 Tournament 2019

Waiver and Release of Liability

(To be read before Signing)

I, _____, willingly sign this document on my own accord and hereby agree that Miami-Dade County (MDC), Miami-Dade County Human Resources Department, their affiliates, his, her, their, or its agents, servants, successors, heirs, executors, or administrators, etc., are not liable and cannot be held liable for any bodily harm, other injury or for any lost or stolen or damaged property which may occur while voluntarily participating in the Human Resources and Wellness Works Basketball "*3 on 3 Tournament*" at the Tamiami Park 10901 SW 24 Street, Miami, Florida 33165 occurring on November 16, 2019.

I certify that I have been appropriately informed of any inherent risk while participating in this event and that I am in suitable physical health and condition to participate in this event.

I understand as with any sports activity or gathering, that there is the possibility that I may sustain an injury that could be potentially significant or deadly. I understand that the proper use of equipment, adhering to the rules and maintaining personal discipline and composure may reduce the risk of bodily harm or death. Nonetheless, the risk of serious injury does exist.

I knowingly and freely acknowledge all such risks both known and unknown, even arising from my own negligence or the negligence of others including the event Coordinator(s), Miami-Dade County, spectators and participants.

I willingly agree to comply with the stated terms and conditions for my participation in this event. If I observe any unusual hazards during my attendance or participation, I will immediately notify the nearest event official or policing personnel.

I will notify the nearest event official or policing personnel of any incidents, accidents, or physical bodily injury or harm to any person (including myself), if hurt or in need of medical assistance/attention.

I the undersigned, have read and attest that I understand the rules of the "*3 on 3 Tournament*".

Name (Print)

Date

Signature

Witness