



Bring Your Game to Canada's Premier Multi-Court Basketball Only Facility.



TEAM ROSTER

School Name: _____

Coach's Name: _____

Coach's Contact: _____

NAME
Team Captain
1.
2.
3.
4.
5.
6.
7.
8.
9.
10.
11.
12.

Waiver: I hereby give my consent for the above mentioned team to play basketball under the auspices of HoopDome and to abide by the rules of HoopDome. Such rules outline the HoopDome policy in such areas as registration, refunds, administration of programs, playing rules, and by-laws and regulations. I hereby give my consent for any player's picture or name to be used in any HoopDome publications necessary. I will remain responsible for the player during, to and from all HoopDome activities and I agree that the HoopDome team/game officials shall in no event be held liable or accused of negligence or any other charges.

I hereby agree to hold harmless HoopDome, team and game officials from any claim or lawsuit. I understand that completion and submission of this application and receipt by HoopDome will bind the above named individual to HoopDome for the entire basketball season for which I am registering.

HoopDome
75 Carl Hall Road, Toronto, Ontario M3K 2B9
Tel: 416-633-HOOP (4667), Fax: 416-633-8118
Email: info@hoopdome.com
Official Website: www.hoopdome.com