PLAYER CHANGE/ADD FORM

USE ONLY All mail-in registrations require prior email notification to contact@see3slam.com PRINT CLEARLY IN BLACK OR BLUE INK.

OFFICIAL

✓1. TEAM NAME CAPTAIN'S NAME		TEAM NUMBER	
¥ 2. DELETE PLAYER	S (LEAVING THE TEAM)		
PLAYER 1 NAME		PLAYER'S PHONE	
PLAYER 2 NAME		PLAYER'S PHONE	1

[₩]3. ADD PLAYERS (JOINING THE TEAM)

PLAYER 1 INFORMATION First Name: Last Name: Address: Apt: City: Zip: State: Day Phone: Night Phone: Email: Birth Date: Age on 7/09/2022 (MM/DD/YY) Height:* ft. in. Gender: M F *Height verification required for all Male/Female Under 6ft Divisions (PLEASE MEASURE) I will be entering the grade in September 2022.

CHECK EACH BOX OF YOUR PLAYING EXPERIENCE:

No experience	 High school junior varsity
Recreational Youth Team	High school varsity (< 500 students)
Junior high/middle school	High school varsity (> 500 students)
Competitive Youth Teams (i.e.: AAU)	Adult league or college intramurals
High school freshman	College Professional
How many times did you practice or in the past 12 months? None (<5 times)	play pick-up or organized games nes) Some(5-25 times)A Lot (>25 times)
Rate yourself as a player on a scale of group, with 10 being the best (circle of	, , , ,
T-SHIRT SIZE: YOUTH YS YM	YL
ADULT S M	L XL XXL XXL
SIGNATURES: (pleaseread "Release and Volum	taryWaiver" and Sportsmanship Pledge)
Player:	

Parent/Guardian:

(Player AND parent/guardian signatures required if player is under 18.)

PLAYER 2 INFORMATION

First Name:												
Last Name:												
Address:												
								Apt:				
City:												
State:							Zip:					
Day Phone:												
Night Phone:												
Email:												
Birth Date: (MM/DD/YY)							A	ge on	7/09,	/2022	:	
Height:*		ft.			in.		Ger	nder:	Μ		F	
Height verification equired for all Iale/Female nder 6ft Divisions				ASURE ing th		g	rade	in Se	epter	nber	2022	2.
HECK EACH BO	X OF	YOL	IR PL	AYIN.	IG EX	(PER	IENC	E:				

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No experience Recreational Youth Team Junior high/middle school Competitive Youth Teams (i.e.: AAU) High school freshman	 High school junior varsity High school varsity (< 500 students) High school varsity (> 500 students) Adult league or college intramurals College Professional
How many times did you practice or p n the past 12 months? None (<5 time	71 1 0 0
Rate yourself as a player on a scale of group, with 10 being the best (circle o	1 to 10 in comparison to your age ne): 1 2 3 4 5 6 7 8 9 10
]YL L □XL □XXL □XXXL oluntary Waiver" and Sportsmanship Pledge)
Player:	

Parent/Guardian:

(Player AND parent/guardian signatures required if player is under 18.)

SPORTSMANSHIP PLEDGE I realize and accept that I am responsible for the conduct of myself, my teammates and my fans. If I or any person associated with my team fails to behave in a sportsmanlike manner, I realize that I, my team and our fans may be ejected from the tournament and asked to leave the site and not return.

4. PAYMENT INFORMATION

PLAYER 1 FORM OF PAYMENT

Check or money order	Visa	MasterCard				
Card #	Expira	ation Date: MM YY				
Name on Card:						
Signature:						
Cardholder phone number: ()	-				
PAYMENT SUMMARY: \$10 fee per change through July 5th \$20 fee per change until 8am July 9th						
Make checks or money orders payable to: Tri-Cities Sunrise Rotary						

REFUND POLICY: No refunds granted for team registration entries.

All mail-in registrations require prior email notification to contact@see3slam.com

RELEASE AND VOLUNTARY WAIVER

PL/	AYE	R 2	FOI	RM	OF	PA	ME	NT	

Check or money order	Visa 🗌 MasterCard					
Card #	Expiration Date: MM YY					
Name on Card:						
Signature:						
Cardholder phone number: () –					
PAYMENT SUMMARY: \$10 fee per change through July 5th \$20 fee per change until 8am July 9th						
Make checks or money orders payable to: Tri-Cities Sunrise Rotary						
Mail your entry to: Tri-Cities Sunrise Rotary • P.O. Box 2652 • Pasco. WA 99301						

REFUND POLICY: No refunds granted for team registration entries.

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This Voluntary Waiver and Release Agreement ("Agreement") is hereby executed by the undersigned, or if the undersigned is under the age of 18 years, then the undersigned's parent or legal guardian, together with any heir, successor, representative or assign (collectively "Participant"), in favor and for the sole and exclusive benefit of the Organizers (as defined herein). In connection with Participant's involvement in a contest, promotional activity or in any other event which may take place at See 3 Slam which involves the use of John Dam Plaza and George Washington Way or any of the streets or facilities at See 3 Slam in Richland by Participant including, without limitation, the 3-on-3 basketball tournament (collectively "Event"), Participant hereby agrees and acknowledges to Tri-Cities Sunrise Rotary and the City of Richland any of the respective Event sponsors or promoters, including, without limitation, all charities benefiting from the Event, individually and collectively "Organizers"), that a strenuous activity, such as basketball, is potentially hazardous, and Participant hereby assumes all risks associated with participating in the Event, including, without limitation, falls, contact with other participants, the effects of weather and the condition of playing surfaces. Furthermore, Participant expressly and unconditionally assumes all risks and dangers known or unknown, foreseen or unforeseen, and relating or incidental to Participant's involvement in the Event and any activity associated therewith. Participant hereby releases, forever discharges and holds harmless the Organizers from and against any and all claims, damages, liabilities, costs and expenses, including, without limitation, death, personal injury or property damage of any kind or nature, arising out of or relating por Participant's involvement in the Event and all activities associated therewith. Participant in nature, arising out of materiapant's involvement in the Event and all activities associated therewith expenses, including,

GENERAL INFORMATION

Player changes or additions may be made prior to See3Slam in order to add a fourth player, replace a player who has been injured, or for other similar reasons. Player changes/additions may only be made by the designated Team Captain **until 8:00 a.m. on Saturday, July 9, 2022**. Incomplete Player Change/Add forms (including those without payment) will not be processed. Teams found using a player who has not been officially added to the team will be immediately disqualified.

• Through July 5th, a player change/addition may be made regardless of the heights, ages, grades or playing experiences of the other team players.

• After July 5th **any new or replacement player must fit the team profile**: the new player may not be taller than the tallest team player or younger than the youngest team player. Playing experience should also match that of the deleted player. See3Slam reserves the right to reject any player change or addition which does not fit the team profile and bracket as determined by See3Slam representatives.

• Each See3Slam team must have a minimum of three or a maximum of four members.

• Only the designated Team Captain may submit a Player Change/Add form.

• Payment MUST accompany all Player Change/Add forms.

Any Player Change/Add form submitted via scanned email must include a Credit Card number with expiration date and signature for processing.
 For protection, arrangements will be made to call in and verify credit card information.

• Each player change or addition made through Tuesday, July 5th will incur a \$10 Fee; late player changes or additions will be allowed July 6th until 8am Saturday, July 9th and will incur a \$20 Fee.

DEADLINES

Through July 5th, 2022 (\$10 Fee per change/add):

Player changes/additions of any sort (see General Information above) will be accepted via scanned email and phone verification.

July 6 - July 7, 2022 (\$20 Fee per change/add): Player changes/additions fitting the team profile (see General Information above) will be accepted via scanned email and phone verification.

July 8- July 9, 2022 (\$20 Fee per change/add): (cash preferred)

Player changes/additions fitting the team profile (see General Information above) will be accepted ONLY at Team Check-In Site.

July 9, 2022 from 7:00 a.m. - 8:00 a.m. (\$20 Fee per change/add): (cash preferred)

ALL PLAYER CHANGES MUST BE MADE PRIOR TO 8:00 A.M. SATURDAY, JULY 9, 2022.

Player changes/additions fitting the team profile (see General Information above) will be accepted ONLY at Team Check In Site.

CONTACT INFORMATION

Mailing address: Tri-Cities Sunrise Rotary Charity/Club P.O. Box 2652 Pasco, WA 99301 Questions? Contact: Phone: (509) 492-2022 Email:contact@see3slam.com For additional information, visit: www.see3slam.com

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FOURNAMENT