

#1 - Archbishop Quigley 3 on 3 Basketball Tournament, October 22, Permission Slip

In consideration of your acceptance of this entry, I hereby, for myself and for my son waive and release any and all rights and all claims for damages against Archbishop Quigley, its tournament coordinators, its faculty, and its representatives for any and all injuries suffered by my son while going to, competing at, and returning from this event.

Player's Name: _____ Phone: _____

Address: _____ City: _____ Zip: _____

School _____ Grade: _____ Parish: _____

Parent's/Guardian's Signature: _____ Date: _____

#2 - Archbishop Quigley 3 on 3 Basketball Tournament, October 22, Permission Slip

In consideration of your acceptance of this entry, I hereby, for myself and for my son waive and release any and all rights and all claims for damages against Archbishop Quigley, its tournament coordinators, its faculty, and its representatives for any and all injuries suffered by my son while going to, competing at, and returning from this event.

Player's Name: _____ Phone: _____

Address: _____ City: _____ Zip: _____

School _____ Grade: _____ Parish: _____

Parent's/Guardian's Signature: _____ Date: _____

#3 - Archbishop Quigley 3 on 3 Basketball Tournament, October 22, Permission Slip

In consideration of your acceptance of this entry, I hereby, for myself and for my son waive and release any and all rights and all claims for damages against Archbishop Quigley, its tournament coordinators, its faculty, and its representatives for any and all injuries suffered by my son while going to, competing at, and returning from this event.

Player's Name: _____ Phone: _____

Address: _____ City: _____ Zip: _____

School _____ Grade: _____ Parish: _____

Parent's/Guardian's Signature: _____ Date: _____

#4 - Archbishop Quigley 3 on 3 Basketball Tournament, October 22, Permission Slip

In consideration of your acceptance of this entry, I hereby, for myself and for my son waive and release any and all rights and all claims for damages against Archbishop Quigley, its tournament coordinators, its faculty, and its representatives for any and all injuries suffered by my son while going to, competing at, and returning from this event.

Player's Name: _____ Phone: _____

Address: _____ City: _____ Zip: _____

School _____ Grade: _____ Parish: _____

Parent's/Guardian's Signature: _____ Date: _____