

**2024- 2025
ORANGETOWN SLOW-BREAK LEAGUE
APPLICATION AND WAIVER
81 HUNT RD, ORANGEBURG, N.Y. 10962**

TEAM NAME: _____ **DIVISION:** _____

YOUR NAME: _____

ADDRESS _____

TELEPHONE: (H) _____ **(C)** _____

EMAIL: _____

WAIVER OF CLAIMS

I, the undersigned, a participant in the Orangetown Recreation Slow-Break Basketball League, fully understands the risks inherent in playing basketball. I am also herein advised to consult with a physician before participating. I hereby assume all risks incident to such activity and agree to hold harmless and indemnify the Town of Orangetown, its affiliated organizations, its officers, directors commissioners, employees, referees, agents and facilities against all losses, claims, actions, suits, liabilities, expenses, damages, and legal fees on account of any loss or injury to myself, persons or property incurred by, or caused by, the undersigned. I further agree to inspect the premises and equipment before playing each game and if I deem any conditions unsafe I will refuse to play.

Date: _____ **Signed:** _____

*** Each player must complete and sign this waiver before participating in the 2024 - 2025 season***