



# Minnesota Timberwolves

## WAIVER AND GENERAL RELEASE

As a parent or legal guardian for (the "Participant") I hereby give my consent to Participant's participation in the program (the "Program") to be conducted by the Minnesota Timberwolves Basketball Limited Partnership ("Timberwolves"). I acknowledge that participation in the Program involves the risk of personal injury to Participant or others. Understanding that risk, in consideration of Participant being allowed to participate in the Program, I, on my own behalf and on behalf of Participant, Participant's heirs, administrators, executors, and assigns, hereby (i) fully release and discharge the Minnesota Timberwolves Basketball Limited Partnership, the NBA, WNBA, and its member teams, NBA Properties, Inc. and their respective parents, subsidiaries, affiliates, directors, officers, employees and agents ("Released Parties") from any and all claims, demands, liabilities, or causes of action of whatsoever kind of nature, in longevity or otherwise, which hereinafter may accrue against them and which in any way arise as a result of Participant's participation in the Program, regardless of whether based on fault or negligence of the Released Parties, (ii) covenant not to sue any of the Released Parties for any matter relating to Participant's participation in the Program, and (iii) indemnify, defend, and hold Released Parties harmless from and against any and all losses, damages, costs or expenses (including attorneys' fees and other costs of defense) which any of them may sustain as a result of, or in connection with, Participant's participation in the Program.

I further agree that the Timberwolves and its employees have the right to photograph or video ("Material") the Participant and use the Material for such purposes as the Timberwolves may choose, including but not limited to, inclusion in Timberwolves social media, publications, advertising, or promotions. Such authorization shall apply to any and all media formats and includes the right to use the Material in any combination with text, photographs or other artwork that may come from third parties. I acknowledge the Timberwolves shall own all copyrights and other intellectual property rights to the Material and hereby waive all moral rights I may have under law to the Material.

I understand that emergency medical or surgical treatment and hospitalization of Participant may be necessary in the event of an unforeseen event. I understand that the Timberwolves will make every attempt to contact me or any emergency contacts listed for Participant; however, I give the Timberwolves the right to contact emergency personnel as needed. I will be financially responsible for any medical attention needed for Participant during the Program and my medical insurance shall be the sole insurance coverage for any medical treatment needed for Participant during the Program. I have read this waiver in favor of the Released Parties and acknowledge that I am signing this document of my own free will, with full knowledge of the risks being assumed which may include, the risk of injury or death to Participant regardless of whether or not caused by negligence or fault of the Released Parties.

I/We have read, understand and agree to comply with the waiver outlined above:

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Signature

Date

# Emergency Contact Information

Emergency Contact First Name \_\_\_\_\_

Emergency Contact Last Name \_\_\_\_\_

Relationship to Participant \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

## Participant Information

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Gender  Male  Female  Unspecified

What team do you play for? \_\_\_\_\_