



MISS BASKETBALL SHOWCASE
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Dear Coaches:

Enclosed you will find a Team Profile Sheet, Player Profile Sheet and Waiver & Release of Liability Forms.

All TEAM and PLAYER information needs to be entered via our **ONLINE ENTRY** system. The documents in this packet are for your use to gather the information. Coaches/Team Administrators will then enter the information via our website forms. You will be emailed login/password information once your team is registered for the event.

- Please photocopy the Player Profile Sheet and Waiver & Release of Liability for each of your players. They should fill out the forms completely and return both forms to YOU.
- **The PLAYER PROFILE SHEETS and TEAM PROFILE SHEET, must be entered into our ONLINE system by JUNE 1st.** All information can be input at www.misterbasketball.com/forms. The system will automatically generate a team roster based on the players you enter.
- We reserve the right to drop any team from the tournament for failure to submit completed profile and roster information.

Please make sure the forms have been filled out completely when entering online. Incomplete forms will not be allowed!

The Waiver & Release of Liability Forms should be turned in at team check-in when you arrive at the tournament, or scanned and emailed to lucas@misterbasketball.com in advance of the event. Please turn in your all of your teams Waiver & Release of Liability Forms at one time!

The information on the Player Profile Sheets will be included in the Player Information Guides for the college coaches who will be scouting the tournament. Every player is required to complete a profile sheet in order to participate, it is not optional.

I cannot stress enough, **PLEASE TAKE NOTE OF AND RESPECT** my request for the information to be entered online by JUNE 1. If you have any questions, please call me at 308-237-4012.

Sincerely,

Doug S. Koster

Miss Basketball Showcase

• TEAM PROFILE SHEET •

This information will be used for media releases and tournament program features. Please be accurate and complete. Print clearly!

What other regional/national tournaments will you play in this summer?

List the national tournaments and the place you finished in each that you played in last summer with this group.

List your top players and the colleges recruiting them.

Any other comments or information of interest.

Miss Basketball Showcase

• PLAYER PROFILE SHEET •

NOTE: This player profile sheet must be filled out completely and accurately by all participants.

Summer Team _____

Primary position you play (circle)

Date of Birth M/D/YR ____/____/____

PG 2G Wing Forward Post

Dark Uniform # _____ Light Uni # _____

Secondary position you play (circle)

Player Name _____

PG 2G Wing Forward Post

Address _____

Level played during Previous Season(circle)

City _____

Varsity Jr. Varsity 9th 8th Other

State _____ ZIP _____

School Stats (for level circled above)

Player's Home Phone _____

Points Per Game _____

Player's Cell _____

Rebounds Per Game _____

Player's Email: _____

Assists Per Game _____

Mother's Name _____

2 PT FG % _____

Father's Name _____

3 PT FG % _____

FT % _____

High School _____

Most points in a single game _____

HS Coach _____

School team's W/L record _____

School Address _____

How far in the state playoffs did your

City _____ State _____ Zip _____

team advance? _____

Coach's School Phone _____

Basketball Awards or honors that player

Circle grade in 2018-2019: 12 11 10 9 8 7

has received (list): _____

Height _____

Weight _____

GPA _____ GPA Scale _____

ACT _____

Class Rank ____/____

Miss Basketball Showcase, Dakota Showcase & MN Showcase

• WAIVER & RELEASE OF LIABILITY •

DISCLAIMER: MR. BASKETBALL, INC., IS NOT RESPONSIBLE FOR ANY INJURY (OR LOSS OF PROPERTY) TO ANY PERSON SUFFERED WHILE PLAYING, PRACTICING, OR IN ANY OTHER WAY INVOLVED IN THE MISS BASKETBALL SHOWCASE OR DAKOTA SHOWCASE FOR ANY REASON WHATSOEVER, INCLUDING ORDINARY NEGLIGENCE ON THE PART OF MR. BASKETBALL, INC., ITS AGENTS OR EMPLOYEES.

In consideration of my participation, I hereby release and covenant not-to-sue Mr. Basketball, Inc., and any of its employees or agents, from any and all present and future claims resulting from ordinary negligence on the part of Mr. Basketball, Inc., or others listed for property damage, personal injury, or wrongful death, arising as a result of my participating in the Miss Basketball Showcase, Big Show, Minnesota Showcase or Dakota Showcase. I hereby voluntarily waive any and all claims resulting from ordinary negligence, both present and future, that may be made by me, my family, estate, heirs, or assigns.

Further, I am aware that participation in basketball may involve injury of some type. The severity of such injury can range from minor cuts, bruises, sprains, and muscle strains to more serious injuries to the body's bones, joints, ligaments, tendons or muscles, to catastrophic injuries to the head, neck, and spinal cord. On rare occasions, injuries can be so severe as to result in total disability, paralysis, or death.

I am voluntarily participating in this activity with knowledge of the risks involved and hereby agree to accept any and all inherent risks of personal injury, property damage, or death. I further agree to indemnify and hold harmless Mr. Basketball, Inc., and others listed for any and all claims arising as a result of my participation in the Miss Basketball Showcase, Big Show, Minnesota Showcase or Dakota Showcase, or any activities incidental thereto, wherever, whenever, or however the same may occur.

I understand that this waiver is intended to be as broad and inclusive as permitted by the laws of Nebraska and agree that if any portion is held invalid, the remainder of the waiver will continue in full legal force and effect. I further agree that the venue for any legal proceedings shall be in Nebraska. I affirm that I am of legal age and am freely signing this agreement. I have read this form and fully understand that by signing this form, I am giving up legal rights and/or remedies which may be available to me for the ordinary negligence of Mr. Basketball, Inc., or any of the parties listed above.

By my signature hereunder, I warrant that I am in good physical condition, and am capable of full and active participation in the Miss Basketball Showcase, Big Show, Minnesota Showcase or Dakota Showcase.

I certify that the participant is covered by medical insurance and accept responsibility for payment of all medical and related services arising from participation in the Miss Basketball Showcase, Big Show, Minnesota Showcase or Dakota Showcase. In addition, I/We being the parents or legal guardians of the participant authorize Mr. Basketball, Inc., and its agents permission to request emergency medical treatment or care as necessary to insure the well being of our dependent.

Participant Name (Printed) _____

Signature of Participant _____ Date _____

Signature of Parent _____ Date _____