Owasso Summit Tryout Release

I agree to allow my daughter, whose name appears on this form, to participate in Owasso Summit tryouts. I understand the coaches and staff are not liable should injury occur; I assume all risks of injury and damage incident to her participation in the said tryouts.

I understand there is a $50 tryout fee that is non-refundable should my daughter not play for Owasso Summit.

I acknowledge my daughter must be registered with USAV and have an OKRVA number before any tryout.

I understand if my daughter is offered a spot on an Owasso Summit team and she commits to receiving the offer, she is not allowed to commit to another club program. Also, I understand I will be paying a monthly fee to cover the total club cost.

_____

Participant's Name

_____ _____/_____

USAV Number Birthday (with year)/Team trying out for

_____ _____

Parent Name Parent Signature

Phone Number:_____

Email address:_____