



OASIS ALL STAR GAMES

604 Doug Mayes Place

Charlotte, NC 28262

704-717-7827

www.OasisAllStarGames.com

Info@OasisAllStarGames.com

Player Registration & Authorization Form

Please PRINT IN FULL and Fill Out Form Completely, Proper Spelling in Readable Text, and Please Attach and Mail with the other 2 (Two) Required Forms. All 3 (Three) Completed Forms Needed for Player Registration.

GENERAL PLAYERS CONTACT INFORMATION

Registration Date _____ / _____ / _____ All Star Team Playing For: NC / SC
Month Day Year (Please Circle)

Sport Playing: _____ Date Of Event: _____ / _____ / _____
(Football, Baseball, Volleyball, Tennis, etc...) Month Day Year

Players Name _____
First Middle Last

Players Home Street Address _____

City _____ State _____ Zip Code _____

Players Home Phone Number _____ Cell Phone Number _____

Players Email Address _____ @ _____

Players Date of Birth _____ / _____ / _____ Player Sex: M / F
Month Day Year (Please Circle)

Players High School Name: _____ City: _____

Players High School Phone Number: _____

EMERGENCY CONTACT INFORMATION

Relationship: Parent / Guardian / Other (Please Explain) _____
(Please Circle)

Emergency Contacts Name: _____
First Middle Last

Emergency Contacts Home Street Address: _____
City _____ State _____ Zip Code _____

Emergency Contacts Home Phone Number: _____

Emergency Contacts Cell Phone Number: _____

Emergency Contacts Email Address _____ @ _____

BASIC MEDICAL DOCTORS CONTACT INFORMATION

Primary Doctors/Physicians Name: _____
First Middle Last

Primary Doctors/Physicians Phone Number _____

CONSENT TO PARTICIPATION FROM PARENT/GUARDIAN

I, as the Parent/Guardian (Print Name) _____
of the Player (Print Name) _____

I give my consent for his/her participation in the athletics and the evaluation for said participation. I do not hold Oasis All Star Games Staff, Organization, or Games Event responsible in any way, shape, or form. I also grant permission for treatment deemed necessary for a condition arising during participation in these activities, including medical or surgical treatment recommended by a medical doctor. I understand that every effort will be made to contact me prior to treatment. I certify that the medical history, contact information, and personal information supplied to the Oasis All Star Games Staff is accurate to the best of my knowledge. I fully understand that the Oasis All Star Games will not accept liability for Pre-Existing Conditions or Injuries.

Agreement Confirmation

Parents/Guardians Signature _____ Date ____/____/____
Month Day Year

CONSENT TO PARTICIPATION/RISK AWARENESS FOR PLAYER

I, the Player/Athlete (Print Name) _____ hereby acknowledge an awareness that the participation in the Oasis All Star Games Event involves a risk of injury, which may include severe injuries involving paralysis, permanent mental disability, or death, and that these injuries may occur in some instances as a result of unavoidable accidents. I accept these risks in giving consent to participate in the Oasis All Star Games Event during the current season by the undersigned athlete.

Agreement Confirmation

Player/Athlete Signature _____ Date ____/____/____
Month Day Year

ADVERTISEMENT INFORMATION

(Please Select As Wanted and Ad Will Be Submitted Later)

_____	Player 1/2 Page Magazine Program Ads	\$300.00
_____	Player Full Page Magazine Program Ads	\$500.00
_____	Business Cards Magazine Program Ads	\$100.00

The below signatures do hereby confirm, that to the best of our knowledge, we have given the correct personal information, contact information, emergency information, and medical contact information, that the Oasis All Star Games Staff requires.

Players Name (Print) _____

Players Signature _____ Date ____/____/____
Month Day Year

Parent/Guardians Name (Print) _____

Parent/Guardian Signature _____ Date ____/____/____
Month Day Year

Remember to include a **Self Addressed – Stamped Envelope** along with your Registration Forms so that Game Tickets will be automatically mailed to you.

Please Feel Free To Contact Us If You Have Any Questions. 704-717-7827

We Look Forward To Another Exciting Event Game Day!

Sincerely,

The Oasis All Star Games Staff