

2008 Nebraska Basketball Team Tryout Application

Name _____
Parent(s)/Legal Guardian(s) _____
Address _____
City _____ State _____ ZIP _____
Home Phone _____ Business Phone _____
High School _____
Coach _____ Age at Tryout _____
Allergic reactions to: _____
Medications currently taking: _____
Any past illnesses or other information that would be useful in the event medical treatment is necessary: _____

Parental Permission (if under 19 years old): I grant permission to the University of Nebraska-Lincoln Coaches, assistants or athletic trainers to act on my behalf for said minor _____ in granting permission for evaluation/ treatment of minor medical problems. I understand that should a major medical problem arise, an attempt will be made to notify me by telephone. In the event that I cannot be reached, I hereby give my consent to such medical treatment as deemed necessary by a licensed physician. In addition, I hereby release the Board of Regents of the University of Nebraska and all its employees from all claims on account of any injuries which may be sustained by my son while attending the University of Nebraska Basketball tryout. I also agree to indemnify the Board of Regents of the University of Nebraska and its employees for any claim which may hereafter be presented to my minor son as a result of any such injuries. This school admits all qualified applicants without regard to disability, race, color, sex, religion, national or ethnic origin or sexual orientation.

I HEREBY CERTIFY THAT I HAVE READ AND FULLY UNDERSTAND THIS AUTHORIZATION

Parent/Guardian Signature _____ Date _____

DOCTOR'S STATEMENT: I hereby certify that _____ is physically fit to participate in an active basketball program and that I know of no physical impairments which would in any manner limit his participation in such a program.

Doctor's Signature _____ Date _____

(The doctor's signature may also be submitted by sending a copy of the athlete's physical form, which is not more than one year old. Physical forms from the **2007-08** school year will be accepted as long as they are **not more than 1 year old from the date of the tryout he is attending**. Tryouts will not be allowed without a physical form or doctor's signature as well as the parent's signature (if the athlete is a minor) filed with the basketball office; **NO EXCEPTIONS.**)

Questions? Call: 402-472-2265 (locally) or 1-800-809-1188
106 Bob Devaney Sports Center