



Presented by:



8TH ANNUAL

NUTMEG HOLIDAY BASKETBALL FESTIVAL

Presented by Orthopedic Associates of Middletown

December 27th - 29th

Vale Sports Club, Middletown

&

Mortensen Comm. Center, Newington

BOYS Age Groups: 4th, 5th, 6th, 7th, & 8th Grades

GIRLS Age Groups: 5th, 6th, 7th, & 8th Grades

Entry Fee: \$375 Per Team - Multi-Team Discounts Available

Registration Deadline: December 3rd

Roster Deadline December 13th

For Teams Participating in a Travel League (Same Town or City). No AAU Teams.

Round Robin Format - Minimum Guarantee of 3 Games

Limited Space Available - Sign Up Today!

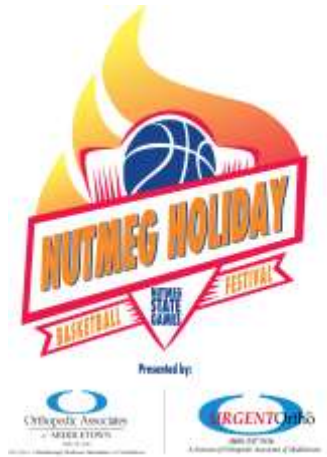
For More Information:

Website: NutmegStateGames.org

Email: Nutmeg@csmg.org

Phone: (860)-788-7041

2021 ShopRite Nutmeg State Games Holiday Basketball TEAM RESERVATION FORM



Rules, Fee & Multi Team Discount Information & Online Registration available:

NutmegStateGames.org/team-sports/holiday-basketball-tournament/

Questions: Phone: (860)788 7041 Email: Nutmeg@csmg.org

975 Middle Street, Unit G, Middletown, CT 06457

TEAM/CLUB NAME: _____

AGE DIVISION: _____ TEAM GENDER: (Circle One) Male Female

Divisions: Boys 4th Grade Boys (10 & Under) and Boys/ Girls 5th Grade (12 & Under) through 8th Grade (14 & Under)

Head Coach (First & Last Name)

Address: _____ City: _____ State: _____ Zip: _____

Mobile Phone #: _____ Other Phone #: _____

Email: _____

Assistant Coach (First & Last

Name): _____

Address: _____ City: _____ State: _____ Zip: _____

Mobile Phone #: _____ Other Phone #: _____

Email: _____

HOW DID YOU HEAR ABOUT THE NUTMEG HOLIDAY BASKETBALL FESTIVAL? (Please Circle)

Clinic Coach Conference Email Newspaper Postcard Previous Participant Radio Web Search

Other: _____

PAYMENT OPTIONS:

School/Town Purchase orders accepted

Checks: Please make checks payable to: CT Sports Management Group

Credit Cards: NutmegStateGames.org/payment (Payment reason: HBSK-Team Name)



Reserve your spot paperless:

Email: Nutmeg@csmg.org:

Head Coach Name & Cell Phone

Division & Gender of Team

Conference, Club or School

Team Name/# of Teams

2021 SHOPRITE NUTMEG HOLIDAY BASKETBALL TOURNAMENT TEAM ROSTER FORM

Phone: (860) 788 7041 Online: www.nutmegstategames.org Email: Nutmeg@csmg.org

TEAM NAME: _____ GRADE _____ GENDER _____

HEAD COACH: _____ MOBILE PHONE: _____

ASSISTANT COACH: _____ MOBILE PHONE: _____

SCORE KEEPER: _____

TEAM UNIFORM COLORS: _____

REGION:* (Circle One): **North** **South** **East** **West** *For Region Map Visit: <https://NutmegStateGames.org/enter>



Each athlete on the team MUST HAVE a properly completed Team Sport Athlete Entry Form (signed waiver) and Proof of Age.

TEAM MEMBERS: (Please PRINT)

<u>PLAYER #</u>	<u>FIRST NAME</u>	<u>LAST NAME</u>	<u>DATE OF BIRTH</u>	<u>ATHLETE WAIVER</u>	<u>PROOF OF AGE</u>
1. _____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
5. _____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
6. _____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
7. _____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
8. _____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
9. _____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
10. _____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
11. _____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
12. _____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

2021 SHOPRITE NUTMEG HOLIDAY BASKETBALL TOURNAMENT TEAM ROSTER FORM

PAGE 2



TEAM NAME: _____ SPORT: _____ DIVISION: _____
 COACH: _____

Each athlete on the team **MUST HAVE** a properly completed Team Sport Athlete Entry Form (signed waiver) and Proof of Age.

TEAM MEMBERS: (Please PRINT)

<u>PLAYER #</u>	<u>FIRST NAME</u>	<u>LAST NAME</u>	<u>DATE OF BIRTH</u>	<u>ATHLETE WAIVER</u>	<u>PROOF OF AGE</u>
13.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
14.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
15.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
16.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
17.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
18.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
19.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
20.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
21.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
22.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
23.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
24.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
25.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

2021 ShopRite Nutmeg State Games-TEAM SPORT ATHLETE WAIVER FORM



TEAM NAME: _____ SPORT: _____ DIVISION: _____

Athlete Name: _____ Gender: M F

Date of Birth: _____ T-Shirt Size: (Youth) L XL (Adult) S M L XL 2X

Street Address: _____ City: _____ State: _____ Zip: _____

Mobile Number: _____ Email: _____

Emergency Contact: _____ Phone #: _____

How did you hear about the ShopRite Nutmeg State Games? (Circle Best)

Coach Email Newspaper Postcard Poster Previous Participant Radio Web Search Other: _____

Release of Liability Waiver, Pledge and Consent Form

In consideration of being allowed to participate in any way with the Connecticut Sports Management Group, Inc., (hereby referred to as: CSMG), its related events and activities i.e. (Nutmeg State Games, CT Masters Games, Football Showcase, Weight Lifting Competition etc.),

I, (Print Name) _____ the undersigned, acknowledge, appreciate, and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular skills, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the CSMG immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS CSMG, Inc, their officers, officials, agents and/or employees, volunteers, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessor's of premises used or the activity ("Releasees") WITH REPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property associated with my presence or participation WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law; and,
5. I declare that to the best of my knowledge, I am in good physical condition and have no disease or injury that would be aggravated by my participation in activities related to the CSMG, Inc. (Nutmeg State Games, CT Masters Games etc.), its related events and activities; and,
6. I, also, declare on my honor that I am an amateur and fulfill the conditions stipulated by the CSMG, Inc. (Nutmeg State Games, CT Masters Games etc.), and all of its related events and activities. I will compete in the Games, keep myself in top physical condition and retain my amateur status; and
7. I hereby consent to allow my picture or likeness to appear on web and social media pages as well as promotional materials related to the "Games". I hereby also consent to allow my picture or likeness to appear in any official documentary, sponsor advertisement or exclusive television coverage of the Nutmeg State Games in any manner incidental to my participation in the Nutmeg State Games and without compensation to me; and
8. I acknowledge that I am aware that there are risks to me of exposure to directly or indirectly arising out of, contributed to, by, or resulting from: an outbreak of any and all communicable disease, including but not limited to, the virus "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)", which is responsible for Coronavirus Disease (COVID-19) and/or any mutation or variation thereof; and,
9. I agree to touch-free temperature checks upon arrival at any facility. I consent to wearing a mask (face covering) as required per facility or State mandate.
10. I declare that I have personal medical coverage and that I have read the release and waiver and by signing it agree to all of its items.

In consideration of having the opportunity to participate as either a team member or competitor at location, and in acknowledging that I am aware of and willing to assume the risks associated with this activity, I hereby voluntarily agree to waive, hold harmless and indemnify Connecticut Sports Management Group and its trustees, agents, volunteers and employees from any and all claims, demands, damages and causes of action of any nature whatsoever arising out of ordinary negligence which I, my heirs, my assigns or successors may have against them for, on account of, or by reason of my participation in the above activities. I indicate my agreement to this hold harmless elective noted below.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

PARTICIPANTS SIGNATURE _____ AGE: _____ DATE: _____

REQUIRED FOR PARENTS/GUARDIANS OF PARTICIPANTS OF ATHLETES UNDER 18

This is to certify that I, as parent/guardian with legal responsibility for this participant do consent and agree to his/her release as provided above of all the Releasee's, and, for myself, my child and our heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasee's from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

PARENT/GUARDIAN'S SIGNATURE

PRINT NAME

DATE SIGNED