



Lehigh Valley SportsFest, Inc.
1791 Ridgeview Dr.
Allentown, PA 18104



www.sportsfest.org

DIVISIONS: Varsity J.V. Risers

LOCATION: CEDAR BEACH
ALLENTOWN, PA

DATE & TIME: THURSDAY JULY 14, 5:00 PM - 10:00 PM
FRIDAY JULY 15, 5:00 PM - 10:00 PM
SATURDAY JULY 16, 8:00 AM - 10:00 PM
SUNDAY, JULY 17, 8:00 AM - 8:00 PM

FORMAT: ROUND ROBIN, POOL PLAY TOURNAMENT

ENTRY FEE: \$250.00 PER TEAM DEADLINE JULY 1ST.

Includes:

- T-shirt for Every Player on the Team**
- Sports Drink After Every Game**
- Trophies for 1st, 2nd and MVP**
- Team Parking Pass**

Executive Director:

Chris Lakatosh, Phone: 484-553-8758, Email:chrislak@hotmail.com

Tournament Directors:

Randy Atiyeh 610-751-4474, randyatiyeh@gmail.com

Toomey Anderson 484-201-6530, toomeyanderson@gmail.com

LEHIGH VALLEY SPORTSFEST XX BOYS BASKETBALL

SCHOOL NAME _____

COACH NAME _____

ADDRESS _____

PHONE _____ **HOME PHONE:** _____

E-MAIL _____

AMOUNT ENCLOSED \$ _____ **(NON REFUNDABLE) MAKE CHECK PAYABLE TO: LEHIGH VALLEY SPORTSFEST, INC**

MAIL ENTRIES TO: Randy Atiyeh, 1229 Minnesota Drive Whitehall Pa 18052

LEHIGH VALLEY SPORTSFEST, INC.

1791 Ridgeview Dr., Allentown, PA 18104 - Phone (484) 225-8852

www.sportsfest.org

July 14, 15, 16 & 17 - 2016



BOYS BASKETBALL HIGH SCHOOL AGES

Please Print Name & Sign Below (Under age of 18 PARENT/GUARDIAN PLEASE SIGN AND STATE RELATIONSHIP NEXT TO PARTICIPANT ON PAGE 2)

HIGH SCHOOL NAME: _____

NAME OF COACH: _____

ADDRESS: _____

E-MAIL: _____

PHONE: _____ FAX: _____

WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in the LEHIGH VALLEY SPORTSFEST, INC., LEHIGH COUNTY & CITY OF ALLENTOWN, PA, program, related events and activities, the undersigned, acknowledges, appreciates, and agrees that: The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, 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 nearest official immediately; and, 4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS the CITY OF ALLENTOWN, PA, LEHIGH COUNTY & LEHIGH VALLEY SPORTSFEST, INC., their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE. 5. I, the undersigned declare on my honor that I am an amateur and agree to follow the rules of the City of Allentown, PA, Lehigh Valley SportsFest, Inc. & Lehigh County, obey my coach(es)/team leader(s), tournament officials, and directors. I am in good physical condition and have no disease or injury that would impair my doing my best in competition. 6. I hereby authorize my first aid, medication, medical treatment, or surgery deemed necessary in case of an emergency. I also authorize the attending medical personnel to execute on my behalf any permission forms and other appropriate medical documents and act on my behalf if I am not immediately available to do so. 7. I hereby consent to allow my picture or likeness to appear in any official document, sponsor advertisement, and/or exclusive television coverage of the Lehigh Valley SportsFest, Inc., Lehigh County & the City of Allentown, PA in any manner incidental to my participation in the Lehigh Valley SportsFest, Inc., Lehigh County & City of Allentown, PA without compensation to me. 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. FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION). 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 Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify the Releasees from any and all liabilities incident to my minor child's involvement or participation in the LEHIGH VALLEY SPORTSFEST, INC., LEHIGH COUNTY & CITY OF ALLENTOWN, PA, EVEN IF ARISING FROM THEIR NEGLIGENCE.

Signature of Coach (listed above.): _____

AMOUNT ENCLOSED: \$ _____ (NON-REFUNDABLE)

Make checks payable to Lehigh Valley SportsFest, Inc.

MAIL ENTRIES TO Chris Lakatosh, 8115 Lark Street, Fogelsville, PA 18051

Complete the Team Roster on page 2 Page 1 of 2

Please complete and return both pages.

HIGH SCHOOL NAME: _____ NAME OF COACH: _____

TEAM ROSTER (Continued from page 1. Signatures below indicate acceptance of the **WAIVER AND RELEASE OF LIABILITY** on page 1 -**UNDER AGE OF 18 - Parent/Guardian - Please sign next to participant and state relationship**)

1. Name & Signature: _____ E-Mail: _____
(print name) (signature)

(Parent/Guardian): _____
(print name) (signature) (relationship)

2. Name & Signature: _____ E-Mail: _____
(print name) (signature)

(Parent/Guardian): _____
(print name) (signature) (relationship)

3. Name & Signature: _____ E-Mail: _____
(print name) (signature)

(Parent/Guardian): _____
(print name) (signature) (relationship)

4. Name & Signature: _____ E-Mail: _____
(print name) (signature)

(Parent/Guardian): _____
(print name) (signature) (relationship)

5. Name & Signature: _____ E-Mail: _____
(print name) (signature)

(Parent/Guardian): _____
(print name) (signature) (relationship)

6. Name & Signature: _____ E-Mail: _____
(print name) (signature)

(Parent/Guardian): _____
(print name) (signature) (relationship)

7. Name & Signature: _____ E-Mail: _____
(print name) (signature)

(Parent/Guardian): _____
(print name) (signature) (relationship)

8. Name & Signature: _____ E-Mail: _____
(print name) (signature)

(Parent/Guardian): _____
(print name) (signature) (relationship)

9. Name & Signature: _____ E-Mail: _____
(print name) (signature)

(Parent/Guardian): _____
(print name) (signature) (relationship)

10. Name & Signature: _____ E-Mail: _____
(print name) (signature)

(Parent/Guardian): _____
(print name) (signature) (relationship)

11. Name & Signature: _____ E-Mail: _____
(print name) (signature)

(Parent/Guardian): _____
(print name) (signature) (relationship)

12. Name & Signature: _____ E-Mail: _____
(print name) (signature)

(Parent/Guardian): _____
(print name) (signature) (relationship)

13. Name & Signature: _____ E-Mail: _____
(print name) (signature)

(Parent/Guardian): _____
(print name) (signature) (relationship)

14. Name & Signature: _____ E-Mail: _____
(print name) (signature)

(Parent/Guardian): _____
(print name) (signature) (relationship)

15. Name & Signature: _____ E-Mail: _____
(print name) (signature)

(Parent/Guardian): _____
(print name) (signature) (relationship)

Lehigh Valley Sportsfest
Robert Edwards Memorial Scholarship

Nomination Form

Robert Edwards was a man whose personal examples exemplified leadership, community involvement, and the development of young people both academically and athletically. He inspired countless lives and preached personal betterment among city youth. Mr. Edwards' life was tragically cut short by a senseless act of violence, but his legacy and all that he stood for will stay with us all forever. This scholarship is a dedication to his memory and his efforts to help build a better community, a better student, a better athlete, or any child who has withstood the most difficult situations.

Please nominate one team participant who is an **incoming senior**, who you feel would be of most need and the most deserving of this award, per the criteria set forth below.

Name of Student

School

Name(s) of Parent/Guardian

Name of Coach

Address

City

State

Zip

Phone

Nominees Future Higher Education Goal:

Academic Achievements:

Class Rank: _____ of _____ students in class

Circle one: Class standing: Top 5% 10% 20% 30% 40% 50%

GPA: _____

Check if you participate in any of the following:

_____ National Merit Scholar

_____ National Honor Society

_____ High Honor Roll

_____ Honor Roll

Other School Organizations and Extracurricular Activities Please list below:

___ Class President ___ Class Officer ___ Officer in Student Government

___ Student Government ___ Editor of Newspaper ___ Newspaper Staff

___ Editor of Yearbook ___ Yearbook Staff Other (please list below):

Community activities and involvement:

Athletic Achievement:

___ All State Honor ___ All Conference ___ Captain ___ All Division

List any other special Achievements or honors:

Please write a short summary of why you are nominating this student athlete or have another teacher, principal or coach add their recommendation:

Coach Signature: _____ Date: _____