**HOUSTON REBELS**

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|  | ELITE BASKETBALL  Player Profile |  |

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| **Player** |  |  |  | | | | |  |  |  |  | | |
|  | Last Name |  | First Name | | | | |  | Age |  | Date of Birth | | |
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|  | School | | |  | Grade | | |  | Height | | |  | Shoe Size |
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|  | Players Cell Phone |  | Players Email | | | | | | | | | | |
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| **Parent** |  |  |  | | | | |  |  | | |  |  |
|  | Which parent will be the main/primary point of contact | | | | | | |  | Primary Phone | | | | |
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| **Father** |  |  |  | | | | |  |  | | |  |  |
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|  | Home Phone |  | Cell Phone | | | | |  | Email | | |  |  |
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| **Mother** |  |  |  | | | | |  |  | | |  |  |
|  | Last Name |  | First Name | | | | |  |  | | |  |  |
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|  | Address (if different) |  |  | | |  | City | | | | |  | State |
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|  | Home Phone |  | Cell Phone | | | | |  | Email | | |  |  |
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|  |  |  |  | | | | |  |  | | |  |  |
| Player Signature | |  | Parent Signature | | | | |  |  | | |  |  |

**HOUSTON REBELS**

ELITE BASKETBALL

2/27/2024

Houston Rebels Parents & Players,

The information presented in this document pertains to the Houston Rebels Elite Basketball Program’s policies, procedures, and operational expenses. This program has a long and rich history of helping players achieve their athletic goals, while playing in a safe and supportive environment. The 2024 Houston Rebels Elite Season will run for approximately 6 months (February 2024 –July 2024). **Please read the information thoroughly and sign in the designated locations.**

Parents are expected to make full payment in advance or follow the installment schedule as outlined below. The parent contributions are expected to cover team expenses including gym rentals, tournaments, uniform replacements and repairs, basketballs, sports equipment, and in season basketball skills training. Houston Rebels Elite is recognized as a 501c3 under the Amateur Athletic Union (AAU). Sponsorships and donations are strategically requested by the coaching staff. However, parents are welcome to make financial request for the funding of their child or toward program expenses. These sponsorships are expected to offset remaining costs, as well as assist in team travel, and other unforeseen expenses. **Any funds raised through participation in a Houston Rebels Elite Fundraiser will be used to cover any outstanding player fees.**

In order to successfully accomplish team goal’s, it is **Necessary that full payment is made, or Contributions follow the schedule below.**

**Fee Description & Schedule**

Registration/Monthly Fee $350.00 March 05, 2024

|  |  |  |
| --- | --- | --- |
| Payment 2 | $250.00 | April 01, 2024 |
| Payment 3 | $250.00 | May 01, 2024 |
| Payment 4 | $250.00 | June 01, 2024 |
| Payment 5 | $250.00 | July 01, 2024 |
|  |  |  |
|  |  |  |
| * Please note: use friend to friend option with PayPal. We also accept Cash App payments. * Please note that Hotel/Travel costs are not included in above, and will be determined once actual reservations and costs are determined. | | |

Payment should be remitted by check, money order, Cash App, Zelle, PayPal or cash. All payments should be remitted to:

**Houston Rebels Elite Basketball**

Should you have any questions, concerns, and/or requests for information, we welcome you to contact us.

**HOUSTON REBELS**

ELITE BASKETBALL

**RELEASE AND INDEMNITY AGREEMENT PERTAINING TO COVID-19**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the undersigned, wish to participate or have my child or ward participate (any such participant being referred to herein as the “Participant”) in the Houston Rebels Elite/Select (the “Activity**”). I understand that there is a risk that the Participant could be exposed to COVID-19 during the Activity, and I wish for the Participant to participate in the Activity despite the risk involved.**

As consideration for the Participant being allowed to participate in the Activity, I, for myself, the Participant (if not myself), and each of our respective successors, administrators, heirs and assigns, hereby RELEASE, ACQUIT, AND FOREVER DISCHARGE Houston Rebels Elite, including the other participants in the Activity; and all of the respective past, present and future officers, directors, attorneys, insurers, agents, servants, suppliers, dealers, representatives, employees, coaches, trainers, volunteers, affiliates, subsidiaries, partners, predecessors and successors in interest, and assigns of the foregoing (collectively referred to herein as the “Released Parties”) from all past, present and future claims arising out of and accruing to the Participant for or in any way connected with any damages sustained by the Participant before, during or after, or as a result of, or in any way connected with, the Activity, including actual or punitive damages for personal injury, dismemberment or death sustained in the Participant’s participation in the Activity, and all results thereof, past, present and future, known and to become known, accrued and to accrue, and INCLUDING ANY CLAIMS OF THE RELEASED PARTIES’ NEGLIGENCE, GROSS NEGLIGENCE, STRICT LIABILITY OR WILLFUL CONDUCT (REGARDLESS OF WHETHER THE RELEASED PARTIES ARE SOLELY, JOINTLY, OR CONCURRENTLY NEGLIGENT OR OTHERWISE AT FAULT).

As a further inducement to the Released Parties, I, for myself, the Participant (if not myself), and each of our respective successors, administrators, heirs and assigns, have agreed to and do hereby INDEMNIFY, DEFEND AND HOLD HARMLESS each and all of the Released Parties from any and all past, present and future claims, demands, actions and causes of action, of whatsoever nature or character, INCLUDING CLAIMS OF THE RELEASED PARTIES’ NEGLIGENCE, GROSS NEGLIGENCE, STRICT LIABILITY OR WILLFUL CONDUCT (REGARDLESS OF WHETHER THE RELEASED PARTIES ARE SOLELY, JOINTLY, OR CONCURRENTLY NEGLIGENT OR OTHERWISE AT FAULT), which may hereafter be asserted by any person, firm or entity whomsoever, arising out of and accruing to the Participant for or in any way connected with any damages sustained by the Participant before, during or after, or as a result of, or in any way connected with, the Activity, including actual or punitive damages for personal injury, dismemberment or death sustained in the Participant’s participation in the Activity, and all results thereof, past, present and future, known and to become known, accrued and to accrue. This obligation to indemnify and hold harmless specifically includes, but is not limited to, any claims for medical bills, doctors’ bills, hospitalization, nurses’ bills, drugs, therapy, administration, and other expenses, including judgment liens, hospitalization liens, attorneys’ fees, and any other form of intervention or lien, or any other expenses incurred by the Participant which are in any way related to the Activity.

As a further inducement to the Released Parties, I hereby represent and warrant to the Released Parties that:

(1) I thoroughly and completely understand that this is a complete and final release and indemnity agreement concerning any claim, demand, or cause of action, which I or the Participant (if not myself) may have against the Released Parties related to the Activity;

(2) I am entering into this Release and Indemnity Agreement freely and voluntarily;

(3) No representations, promises or statements made by any agent, attorney or other representative of the Released Parties have influenced me in causing me to sign this Release and Indemnity Agreement;

(4) The Participant has adequate medical insurance provided by parties other than the Released Parties covering the possible injuries to the Participant that may occur as a result of his or her participation in the Activity;

(5) The Participant does not have any physical condition or illness that would be aggravated by participation in the Activity or that would make participation in the Activity medically inadvisable;

(6) I grant full permission to the Released Parties, with no obligation to compensate me, the Participant (if not myself), or any other person in any way, to use at any time any photographs, videotapes, motion pictures, recordings, or other record of the Participant’s performance(s) during the Activity; and

(7) I agree that (i) any dispute arising out of or related to this Release and Indemnity Agreement and/or the Participant’s participation in the Activity will be settled by binding arbitration in Houston, Texas in accordance with the then current Commercial Arbitration Rules of the American Arbitration Association, and (ii) the prevailing party in such arbitration shall be entitled to recover such party’s costs and attorneys’ fees related to the arbitration from the non-prevailing party.

I understand that in allowing the Participant to participate in the Activity the Released Parties are relying on the representations and warranties I have made herein. This Agreement shall be governed by the laws of the State of Texas (without regard to conflict-of-laws principles). If any provision of this Agreement is held to be invalid or unenforceable, that holding shall be without effect upon the validity or enforceability of any other provision of this Agreement.

Participant’s Signature: Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature (if Participant under 18): Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**HOUSTON REBELS**

ELITE BASKETBALL

Player Commitment Contract

At the Houston Rebels Elite, we strive to teach each student the importance of hard work and commitment. The basketball team is an opportunity for both fun and learning, and we want each student athlete to make the most of his/her experience. In order to facilitate this, each student athlete is asked to read this contract carefully with his/her parents and be aware of the responsibilities and requirements that a commitment to the basketball team involves. The Commitment Contract holds each student athlete to a certain standard of behavior, both on and off the court. Parents are asked to report behavior that violates this code of conduct, and they are invited to discuss consequences with the athletic director/coach.

**Commitment 1 - ATTENDANCE**

* All student athletes are expected to be on time, and to attend every practice.
* Any athlete who arrives late, leaves practice early, or misses practice will be expected to complete a conditioning drill such as pushups and wind sprints. This is not necessarily a punishment, but to keep our athletes in shape and continue their athletic conditioning. Chronic tardiness or absences can impact playing time.
* All athletes must participate in team meeting before the game. The meeting time for each game will be designated at least one day before the game.

**Commitment 2 - ATTITUDE**

* Sportsmanship and a positive attitude are expected at all times, and will be reinforced on and off the court.
* Student athletes must foster an uplifting and encouraging atmosphere towards peers at all times.
* Undermining the authority of coaches, teachers, or parents is not acceptable. When instructions or constructive criticism is given, student athletes are expected to respond with an attitude of respect and compliance.
* Student athletes are expected to respond respectfully to all authority figures.
* No offensive language. No exceptions.

**Commitment 3 - Hydration and Diet**

* All student athletes are encouraged to drink ½ a gallon of water or sports drink during the day on game days, and are encouraged to drink this much daily during the season to prevent dehydration. Student athletes should minimize the intake of fried foods and other unhealthy foods in order to maximize athletic performance.

**Consequences**

* Adhering to team expectations is an important aspect of all sports. Therefore, discipline in most cases will be resolved on a team basis. Of course, there are situations where individual consequences are warranted including, conditioning drills, loss of playing time, and removal from the team. These options are at the Coach’s and Program Director’s discretion.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Athlete (PRINT) Student Athlete’s SIGNATURE

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent's signature(s)

**HOUSTON REBELS**

ELITE BASKETBALL

Medical Authorization Form

Event: Basketball sports activities, tournaments, travel, practices, and all affiliated activities sponsored by the Houston Rebels Elite.

Father’s Place of Employment\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_\_

Mother’s Place of Employment\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_\_

Family Physician \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_\_

Physician Office Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of person(s) who may be / should be contacted if parent or guardian cannot be reached:

Name #1\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_\_

Home Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name #2\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_\_

Home Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List any medications you are presently taking:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any known allergies or other medical problems:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medical Insurance: Insurance Company \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Insured \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Certificate No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Group No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Coverage\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

“In case of accident or serious illness, I request the Houston Rebels Elite authorities to contact me. If I cannot be reached, I hereby authorize the Houston Rebels Elite authorities to call the physician indicated above. If it is impossible to contact physician, I authorize the Houston Rebels Elite authorities to arrange for all necessary medical services for said participant on my behalf.”

Parent or Legal Guardian of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**HOUSTON REBELS**

ELITE BASKETBALL

Transportation Release Form

Trips will be made in a private conveyance and/or coaches vehicle(s) to most all Houston Rebels Elite activities, where not transported by a parent. Reasonable effort will be made to ensure a safe trip. If you wish for your child at any time to be transported by Houston Rebels Elite authorities, members, or parents of this organization, please sign below.

The undersigned, being the parent or legally appointed and qualified guardian of

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ does hereby consent to said player’s participation in the Houston Rebels Elite basketball activities and transportation to and from said events.

I herewith authorize the Houston Rebels Elite authorities to secure medical services for said player, if necessary. I agree to pay, either directly or through my own personal health and accident insurance policy, all medical or hospital costs. I further agree to hold the Houston Rebels Elite, its Board Members, administration, and/or members harmless from all liability for any injuries which said player may receive while participating in or while traveling to and from such events.

I have listed below any pertinent medical information applicable to allergies, nervous disorders, heart trouble, diabetes, epilepsy, etc.

Special information (if applicable)

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| --- |
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Parent or Legal Guardian of (player) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This form must be signed and returned prior to the player being allowed to participate. Parent’s approval may not be obtained by telephone.

**HOUSTON REBELS**

ELITE BASKETBALL

Player and Parent Expectations

Players are expected to commit to attend practice on a regular basis and help to contribute to the overall team development. Teams practice twice a week for 1 to 2 hours at a time. Team skills training is 1 time per week. All team events are mandatory unless Program Director provides approval. There are no guarantees of playing time because of the competitive nature of AAU/Summer basketball. However, we strive to get every player some playing time every game. How much playing time a player receives is dependent upon those players’ commitment to practice and abilities. All starting positions are earned during practice. **Therefore, if a player misses practice, they may be ineligible to start in the tournament immediately following the absence.**  
As a parent, you want the best for your child. Our coaches also want the best for your child. In order for this to occur, it is important that parents - **no matter how basketball knowledgeable they might be, refrain from coaching their child in practices and games.**  The coach has all the players' interests in mind. It is always uncomfortable for a coach to remove a player from a game because he is acting upon his parent's coaching rather than fulfilling the expectations of the team and coach. A parent needs to be positive at all times and cheer for every member of the team. Any questions concerning coaching should be brought to the coach's attention in a PRIVATE conversation without players present. **24 Hour Rule: Do not contact a Coach regarding playing concerns within 24 hours of the last game of the tournament. Competitive games can produce a lot of tension and emotions. Allowing 24 hours enables everyone to regain their emotional regulation. Please initial here to acknowledge compliance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Any player planning to leave the Houston Rebels Elite Program should notify their coach and program director immediately. Parents will be responsible for any unpaid balances including the monthly fees for the remainder of the current season. Uniforms, travel bags, and team equipment must be returned to practice location within 48 hours.** **Please initial here to acknowledge compliance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**All parents and players are needed and expected to provide assistance at tournaments hosted by the Houston Rebels Elite. Parents may be needed to run scoreboards, run concessions, oversee gyms, and other such matters. When the Houston Rebels Elite host fundraising events, all players including at least one parent is expected to fully participate. These are very important events that help the program accomplish goals and foster a quality experience for each player.**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, have read and fully understand the Houston Rebels and Parent Expectations. I also agree to comply with program rules, expectations, and return policies.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Player Parent Date

**HOUSTON REBELS**

ELITE BASKETBALL

PLAYERS CODE OF ETHICS

* Players will follow all reasonable and ethical requests made from the coaching staff at ALL times.
* Players will participate in all practice drills and conditioning drills without complaints. (Report injuries to Coach or PD)
* Players will not disrespect or diminish teammates during/after games. If caught doing so, the player will be suspended for the remainder of the tournament and depending on the severity possible suspension from the organization.
* Good sportsmanship is a MUST at all times. This will be encouraged during practices and games.
* Players are not to be disrespectful to coaches, referees, other officials, players, or spectators.
* Players are not to confront officials for any reason.
* There will be no smoking or drinking of alcohol at any time.
* Any player who exhibits poor conduct will be subject to suspension from the organization.
* Any player with poor grades in school will be encouraged to improve academic performance.
* Players must report all injuries to their coach immediately.
* All players are expected to be on time for all practices and games.
* Players are not allowed to have any distractions before/during games or practices (i.e.: girlfriends, boyfriends, loud music, etc.). Players must focus on the job and expectations at hand.
* **Players are not allowed to play for multiple basketball organizations**
* Players are not allowed to use profanity at any time!!!

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, HAVE READ AND FULLY UNDERSTAND THE PLAYERS CODE OF ETHICS.

Players Signature

PARENTS CODE OF ETHICS

I hereby pledge to provide support, care, and encouragement for my child, other players, and the Coaches by following this PARENTS CODE OF ETHICS.

* I will encourage good sportsmanship by demonstrating positive support for ALL players, coaches, and officials at every practice, game, or other event sponsored by Houston Rebels AAU Basketball Club or any other organized event we are participating in.
* I will place the emotional and physical well-being of my child ahead of any personal expectations or desire to win.
* I will provide the support for coaches and officials working with my child to provide a positive, enjoyable experience for all.
* I will obey all laws for smoking and drinking.
* I will remember that the games are for the children and NOT the adults.
* I will do my best to make these activities a pleasurable experience for my child.
* I will treat other players, coaches, parents, fans, and officials with respect regardless of race, sex, creed, or ability.
* I will go over the PLAYERS CODE OF ETHICS with my child and assure that he/she fully understands the rules.
* I will promise to help my child enjoy the youth basketball experience within my personal constraints by volunteering, being a respectful fan, providing transportation, or whatever I am CAPABLE of doing.
* I will not approach the coaches or players during practice or games (24 hour minimum).
* I will not use profanity at any time!!!
* If I need to approach the coach(s) regarding any unfavorable issues, I will wait 24 hours and then schedule a meeting.

I/We, the parent(s) of player \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, HAVE READ AND FULLY UNDERSTAND THE PARENTS CODE OF ETHICS.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature Parent Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Date