MATA SPORTS PERFORMANCE

MATA Sports Performance LLC | Edinburg, Texas

FINISH WHAT YOU STARTED.

PARENT / GUARDIAN CONSENT

SIGN ONCE | CURRENT AND FUTURE PARTICIPATION

For a participant under 18. Complete one form per child and sign once. Covered activities include basketball, training, exercise, court rentals and related facility use provided by MATA at the address below. This agreement covers current and future visits while the child is under 18, subject to Section 6.

1. PARTICIPATION AND PARENT AUTHORITY

I am this child's parent or legal guardian and have authority to give permission for the covered activities. I permit the child to participate and will communicate relevant participation restrictions directly with MATA before activity. I understand this form is not a promise of a specific training result or medical clearance.

2. RISK ACKNOWLEDGMENT

Basketball, training, exercise and facility use involve risks including contact with players or equipment, falls, sprains, fractures, overexertion, dehydration, heat illness and, in rare cases, serious injury or death. Outdoor conditions and changing weather may increase risks. Coaching, supervision and precautions cannot remove every risk.

3. PARENT RELEASE OF PERSONAL CLAIMS - READ CAREFULLY

TO THE EXTENT TEXAS LAW PERMITS, I RELEASE MATA SPORTS PERFORMANCE LLC AND ITS OWNERS, COACHES, STAFF AND OFFICIALS FROM CLAIMS I PERSONALLY HOLD ARISING FROM THE COVERED ACTIVITIES, INCLUDING CLAIMS CAUSED IN WHOLE OR IN PART BY A RELEASED PARTY'S ORDINARY NEGLIGENCE. THIS DOES NOT RELEASE GROSS NEGLIGENCE, INTENTIONAL MISCONDUCT OR RIGHTS THAT CANNOT LAWFULLY BE WAIVED. I SIGN ON MY OWN BEHALF. THIS FORM DOES NOT PURPORT TO WAIVE THE CHILD'S INDEPENDENT LEGAL CLAIMS.

Child / athlete full legal name

Date of birth (MM/DD/YYYY)

Primary activity (for records)

Child age / middle school / high school / other

Parent / legal guardian full name

Relationship to child

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4. SAFE PARTICIPATION AND EMERGENCY RESPONSE

Follow staff instructions, use equipment only as permitted, wear appropriate athletic shoes, bring water, and report unsafe conditions promptly. Stop activity and tell staff about pain, dizziness or other warning signs. Do not participate while impaired or when activity is not appropriate for you. Court rentals are limited to 10 people total; group training is limited to 8 athletes per class.

I understand MATA may stop or change an activity for safety or weather. In an emergency, I authorize staff to contact emergency services and the contacts below and to provide assistance within their training. Emergency care remains subject to applicable law and provider decisions. Share medical information directly with staff only when needed; do not enter diagnoses on this form.

5. OPTIONAL PHOTO AND VIDEO PERMISSION

Choose one. This permission is separate from liability terms and covers images of the child from current and future covered activities for MATA's website and social media, without publishing the child's name. Permission may be withdrawn in writing for future recording and uses. Filmed competitions may have separate recording terms.

- ☐ Yes, I give permission.
- ☐ No, I do not give permission.

6. PARENT / GUARDIAN ACKNOWLEDGMENT AND SIGNATURE

I have read both pages, had the opportunity to ask questions, understand the risks and release of my own claims, and sign voluntarily. Coverage continues for this child's current and future covered activities from signing until age 18, replacement by a new signed agreement, or my written withdrawal before future participation. By typing or drawing my full name, I intend to sign and consent to electronic signing and storage. I may save or request a copy.

Emergency contact name

Emergency contact phone

Parent / guardian phone

Parent / guardian email (optional)

Parent / guardian electronic signature (full legal name)

Date signed (MM/DD/YYYY)