



MISSISSIPPI BASKETBALL & ATHLETICS

2240 Westbrook Rd. – Jackson, MS 39211 – Ph: (601) 957-7373

www.mbahoops.net or www.mbasportsclub.com

MBA MEMBERSHIP CONTRACT

In consideration of my membership privileges with MBA, I hereby agree on behalf of myself (and family members, if applicable) to the provisions stated below.

1. The original term of this agreement will begin on the date signed and will be considered as an open end contract that can be terminated by MBA with a ten (10) day notice. During this term, I (and my family members, if applicable) will have full use of the facilities and equipment of MBA, except during special events hosted by MBA that require full use of the facilities (such as tournaments).

2. I agree to pay MBA the sum of _____ per month for my membership. The first payment should be made on the day of initial enrollment. I understand that my contract can be renewed on a month by month basis or paid in full for a term of three, six, or twelve months.

3. I also authorize MBA to secure payment through one of the following methods:

___ Cash ___ Check ___ Credit card

4. I understand that MBA reserves the right to cancel any membership due to broken policies or any reason at it's discretion whether written, oral, or implied. If membership is canceled there is no refund for any membership fees paid.

MBA MEMBERSHIP INFO

Name: _____ Cell number: _____ DOB: _____

Email: _____ Address: _____

MBA LIABILITY RELEASE FORM

By signing below, I understand that even when all reasonable precautions are taken accidents happen. Therefore, I release and hold harmless Mississippi Basketball and Athletics and its employees, members, staff, guests, contractors, volunteers, coaches, directors, administrative staff, and owners; along with any other associated body pertaining to the MBA, from any liability or any injury, loss, or damage connected in any way whatsoever to me or any guest and/or affiliate, and our participation in MBA activities or on the premises whether inside or outside. I and any party or parties associated with me, pledge to follow all conduct and sportsmanship rules of the MBA and understand that should it be determined that I am in any violation of such rules, that I may be removed from the premises. It is my understanding that any guest that may accompany me to the MBA facility falls within my obligation to have informed them of this policy and that it is my sole responsibility to ensure that said guest (s) shall comply with all rules, regulations and/or policies and that the MBA shall not be held liable for any occurrence that may befall them or me.

Signature: _____ Date: _____ Witness: _____

Name: _____ Address: _____ Phone: _____

Of family members: _____ Names (if applicable): _____

_____, _____, _____

Please provide date of birth on all members above