## **BROOKLYN SPORTS & ENTERTAINMENT**

## CONSENT AND RELEASE

In consideration for being permitted to participate in the Long Island Nets Three-on-Three Tournament event at or around the parking lot of NYCB LIVE, home of the Nassau Veterans Memorial Coliseum, located at 1255 Hempstead Turnpike, Uniondale, New York 11553, from on or about August 25, 2018 through on or about August 26, 2018 (the "Event"), I agree to the following:

1. In connection with the Event and my participation therein, I assume full risk and responsibility for any death, disability, or bodily injury that I may suffer, or damage to property that may be caused, arising from any cause whatsoever, or any death, disability, or bodily injury or property damage to another person arising from my participation in the Event.

I forever discharge and release Brooklyn Nets, LLC *d/b/a* the Long Island Nets, Nassau Events Center, LLC, the National Basketball Association, the National Basketball Association Development League, the Town of North Hempstead, their respective owners and related companies and entities, and their respective employees, officers, directors, agents, contractors, and other representatives, successors, and assigns (all of the foregoing entities and individuals, collectively, the "Released Parties"), from all claims, losses, or damages directly or indirectly arising from any such death, disability or bodily injury or property damage, and any claim or legal action of any nature, known, or unknown, in law or in equity, which I or my heirs, or legal representatives shall or have made in that regard.

- 2. I release and transfer forever without reservation and without compensation or consideration (i) all rights in and to my participation in the Event and the reproduction or other transcriptions of the Event by video, film, or any other methods, and (ii) the use of my name, picture, portrait, likeness, or identification in all media and modes of advertising or promotions of or by the Released Parties and their respective designees, for or in connection with the Event.
- 3. I agree to be contacted by, and receive communications from, the Released Parties and their respective designees via the contact information provided below (including, without limitation, via the e-mail address provided below).

By signing this Consent and Release, I acknowledge that I have read and understand the provisions set forth in this Consent and Release and voluntarily consent to the terms set forth.

INDIVIDUAL: Name (P	lease Print)			Age		
Date of Birth (Mo.)	(Day)(Year	·)Address			_	
(City/Town)	(State)	(Zip)	Tel. No. (	)	_	
SIGNATURE			Date			
PARENT/GUARDIAN	(Required for parti	cipant(s) less than	18 years of age	on the date of	the Event):	
I affirm that I am the pauthorization, and the redescribed above; and I a claim of any invalidity of	elease described ab agree to indemnify	ove; I have read	and I understan	d this authoriz	zation and the rele	ease
Name (Please Print)				-		
Address			_(City/Town)			
(State)	(Zip)		_(Tel. No.) (	)	_	

E-mail Address

SIGNATURE Date