Triple Threat
BASKETBALL ACADEMY

coachrob@triplethreatvictoria.ca
www.triplethreatvictoria.ca

Waivers & Policies

2026/27 Season

1. Participation Waiver, Risk Acknowledgment & Release

I give consent for my child (children) to participate in basketball programming organized by Triple Threat Basketball Academy Inc. ("Triple Threat") for the 2026/27 season.

Assumption of Risk.
I understand that basketball involves inherent risks, including but not limited to falls, collisions with other players, sprains, strains, and other injuries, and that these risks cannot be entirely eliminated regardless of the care taken by coaches or staff.

Release.
In consideration of my child being permitted to participate, I, on my own behalf, release, waive, and discharge Triple Threat Basketball Academy Inc., its coaches, staff, contractors, and volunteers, and the owners/operators of the facilities used for training and games (including but not limited to St. Margaret's School and School District 61 facilities), from any and all liability, claims, and demands arising out of injury, loss, or damage to my child or their property while participating in Triple Threat activities, or while traveling to or from them.

Emergency Medical Consent.
I authorize Triple Threat coaches and staff to seek emergency medical treatment for my child if I cannot be reached, and to share relevant medical information (allergies, conditions, medications) with attending medical personnel as needed.

Acknowledgment.
I have read this agreement, understand it, and voluntarily agree to its terms.

[ ] I agree to the above — Parent/Guardian Name: _____ Date: _____

coachrob@triplethreatvictoria.ca
www.triplethreatvictoria.ca

2. Media Consent (Optional)

I grant Triple Threat Basketball Academy Inc. permission to photograph and/or video my child during program activities, and to use these images in Triple Threat's marketing materials — including its website, social media channels, and promotional materials — without compensation.

This consent is optional and separate from registration. Declining it will not affect my child's participation in any way.

[ ] Yes, I consent to photo/video use as described above.

[ ] No — please exclude my child from promotional photos and video where reasonably possible.

coachrob@triplethreatvictoria.ca
www.triplethreatvictoria.ca

3. Travel Team Addendum (U11–U14 Travel Teams Only)

Shown in addition to the General Waiver above.

Transportation & Travel Medical Consent.
For Travel Team activities involving travel outside of Victoria, I authorize Triple Threat coaches or designated parent volunteers to transport my child to and from games and tournaments. I extend the emergency medical consent above to cover the full duration of any such travel.

[ ] I agree to the above — Parent/Guardian Name: _____ Date: _____

(Skill Development registrants do not see this section — it applies only to Travel Team registration, where away games/tournaments are part of the program.)

coachrob@triplethreatvictoria.ca
www.triplethreatvictoria.ca

4. Refund & Cancellation Policy

(Acknowledgment, not a release — parent confirms they've read and understood the terms.)

I have read and agree to the following Refund & Cancellation Policy:

General Policy (Skill Development and ID Camp / Assessments):

- Withdrawal 7 or more days before the date of the first session: full refund, less a 6% Rec-Tec administration fee
- Withdrawal 3–6 days before the date of the first session: 50% refund, less a 6% Rec-Tec administration fee
- Withdrawal within 2 days of the date of the first session, or after the program has started: no refund, except as provided under Late Registration or Medical Withdrawal below

Late Registration.
Players joining Skill Development or ID Camp after the program has begun register at the full fee. Triple Threat will refund the pro-rated value of any sessions already missed. This is separate from the withdrawal terms above.

Travel Teams (U11–U14):

- The 7-day / 3-day windows above apply up until roster lock, which is the date of the first Travel Team practice.
- Once a roster is locked, team fees are non-refundable, as gym rental and coaching costs are committed on a per-team basis regardless of roster changes — except as provided under Medical Withdrawal below.

Program cancellations by Triple Threat (e.g., due to weather, gym closure, insufficient enrollment): affected sessions will be made up where possible, at Triple Threat's discretion.

Medical Withdrawal.
Skill Development and ID Camp: If a player must withdraw due to a documented medical condition or injury, a 6% Rec-Tec administration fee will be deducted from the remaining unused portion of the registration fee, with the balance (94%) refunded.

Travel Teams: If a player must withdraw due to a documented medical condition or injury (a doctor's note is required), 50% of the remaining unused portion of the registration fee will be refunded.

These terms apply in place of the standard cancellation windows above.

[ ] I have read and agree to the Refund & Cancellation Policy — Parent/Guardian Name: _____ Date: _____

coachrob@triplethreatvictoria.ca
www.triplethreatvictoria.ca

5. Code of Conduct

(Acknowledgment)

I have read and agree that, as a parent/guardian of a participant in Triple Threat Basketball Academy programming, I will:

- Support a positive, respectful environment for all players, coaches, officials, and other families, at practices, games, and while traveling to or from them
- Refrain from disparaging remarks, aggressive behaviour, or arguing with officials, coaches, or other parents at any Triple Threat event
- Support my child's coaches' decisions regarding playing time, position, and team strategy, and direct any concerns to the coach or Triple Threat directly rather than in front of players
- Understand that Triple Threat may, at its discretion, ask a parent or guardian who does not follow this Code of Conduct to leave a session or event

I understand my child is also expected to show good sportsmanship, respect teammates, opponents, and coaches, and follow the direction of Triple Threat coaching staff.

[ ] I have read and agree to the Code of Conduct — Parent/Guardian Name: _____ Date: _____

coachrob@triplethreatvictoria.ca
www.triplethreatvictoria.ca

6. Privacy & Data Policy

(Acknowledgment)

I understand that Triple Threat Basketball Academy Inc. collects registration information (including my child's name, birthdate, contact information, and any medical information provided) for the purposes of:

- Administering registration, teams, and rosters
- Contacting me regarding schedules, program updates, and emergencies

I understand this information will not be sold or shared with third parties for marketing purposes, and will be retained only as long as needed for program administration.

[ ] I have read and agree to the Privacy & Data Policy — Parent/Guardian Name: _____ Date: _____