



www.ReachLegends.com
(313) 355-2335

Michigan Warriors JAMFEST

Lionia, MI

May 3-5

EACH PLAYER MUST HAVE THE FOLLOWING ITEMS:
Spending Money for Meals, etc Health Insurance Information (phone screen shot)

Team Fee : \$40 per player - CASHAPP \$younglegends98

Game1 – Sat May4th - 11:00am vs CommonBond – HYPE Athletics Dearborn – Ct#5

Game2 – Sat May4th – 1:00pm vs Flint Affiliation – HYPE Athletics Dearborn – Ct#5

Name: _____ has my permission to travel to **MICHIGAN WARRIORS JAMFEST event in LIVONIA, MI – MAY 3-5, 2024.** I authorize **R.E.A.C.H Youth Programs (Staff)** as temporary guardian to obtain any medical or surgical care deemed necessary in the case of an emergency. I grant permission to for the emergency room staff to perform any necessary medical treatment in the event of an accident, illness, or life-threatening emergency.

Address: _____ City: _____ Phone: _____

Age: ____ Date of Birth: ___/___/___ School: _____ Grade: _____

Medical Insurance: _____ Policy Number: _____

Any Special Medical Attention/Medication/Disabilities/Allergies:

Parent/Guardian Signature: _____ Date: _____