

CROSSROAD BASKETBALL
PARENT CONTRACT
AAU SEASON

Players Name/Team:_____

I _____, will fully support my son/daughters coach and coaching staff this upcoming AAU season. By signing this contract I understand that I will not coach from the sidelines, question the coach's decisions, complain about playing time, or display any other negative actions that could affect the development of not only my child but the rest of the team. I am fully aware that I represent the Crossroads Basketball program as does my child. I will be respectful during games and let the coaches handle the referees and any on court situations.

By signing this contract I am giving the coach my full support to run the team the way he/she sees fit. I will follow the chain of command with any problem that may occur and respect the 24hr rule. I will abide by these rules and make sure that my child abides by the players contract and code of conduct. I am aware that lack of participation in practice can affect my child's playing time. I fully understand that AAU is non refundable and breach of this contract could result in my child being removed from the team.

Parents Signature

Date