

2021 WAIVER FOR PARTICIPATION IN EYMFA, Inc. Activities

I am the parent or legal guardian of the above-named participant. I acknowledge that my child is in good health. I give permission for my child to participate in any and all East Manatee Youth Football Association, Inc. activities, including transportation to and from the activities. I give permission for, and assume any and all risk of my child's use of various playing surfaces including natural and artificial grass, hard dirt, and under varying conditions, including, dry, wet and muddy, and I hereby understand that any surface may be regular or irregular.

I acknowledge the potential dangers of participation in any sport and I understand that participation may result in **BODILY INJURY, PARALYSIS, BRAIN INJURY, PERMANENT DISABILITY AND/OR DEATH.** I acknowledge that any protective equipment does not prevent all participant injuries, and therefore I release, absolve, indemnify, hold harmless and waive any claim against the coaches, volunteers, board members and any and all organizers, sponsors, supervisors, participants, and persons transporting my child to and from activities, for any injury to my child whether the result of negligence or for any other cause.

I give permission for emergency medical/dental treatment or first aid to be administered to my child for any illness/injury/accident resulting from participation in EYMFA, Inc. activities.

I am aware that EYMFA, Inc. carries group accident medical insurance which is secondary or excess to my insurance which is considered primary insurance. Further, I agree to notify in writing my head coach and EYMFA of any medical claim from participation as soon as reasonably possible. I understand that the registration fee is not premium for insurance and that deductibles may apply.

I grant EYMFA, Inc. the right and permission to make, reproduce, broadcast or otherwise use in perpetuity my child's name and likeness including photograph, films, videos, recordings, or other depictions or images in any form or media throughout the universe, for promotional material, advertising, editorial, trade or other purpose. To the extent that any benefit may accrue therefrom, I forever waive any interest in or claim to such benefit and acknowledge that EYMFA, Inc. is under no obligation to exercise any rights granted herein.

In consideration of participation in EYMFA, Inc. activities and by my signature below, I confirm that I have read, fully understand and voluntarily agree to be bound by all of the above and that all information provided by me is true and accurate.

If the player/coach is under 18 a parent or guardian must sign on their behalf.

Printed Name _____

Address _____

Email _____

Phone # ____ - ____ - _____ Date of Birth ____/____/____ Coach { } Player { }

Signature of Player or Coach _____ Date ____/____/____

If player/coach is under the age of 18, a parent or guardian signature is required

Printed Name of Parent or Legal guardian _____

Signature of Parent or Legal guardian _____ Date ____/____/____

Parent Email _____ Phone # ____ - ____ - _____

Emergency Contact Name _____

Emergency Contact Phone # ____ - ____ - _____

League Admin Accepted on ____/____/____ by _____

Approved to play by meeting all requirements

Print Name _____ Signed _____