



RYFC Football Player and Cheerleader Application and Contract



Participant Information	Last Name:	First Name:	Middle Initial:	Attach Recent Wallet-Sized Photo Here	
	Street Address:				
	City:	State:	Zip:		
	Date of Birth:	Grade 9/2022:	Approx. Weight (Football Only):		
	School:	Lives With: Mom Dad Other: _____			
	Mother's Name:	Mother's Phone:			
	Father's Name:	Father's Phone:			
	Mother's Email:				
Father's Email:					
Team and Payment	<u>Football Players (Grade as of 9/2023)</u>		<u>Cheerleaders (Grade as of 9/2023)</u>		<i>Payment: This section to be completed by organization secretary/registrar</i>
	<input type="checkbox"/> A Football: Grades 6 & 7		<input type="checkbox"/> A Cheerleading: Grades 6 & 7		Date Registered: / /
	<input type="checkbox"/> B Football: Grades 4 & 5		<input type="checkbox"/> B Cheerleading: Grades 4 & 5		Registration Fee: Cash/Ck #:
	<input type="checkbox"/> Rookie Tackle/C: Grade 3		<input type="checkbox"/> C Cheerleading: Grades 2 & 3		Fundraising: Cash/Ck #:
<input type="checkbox"/> Flag Football: Grades K, 1, 2		<input type="checkbox"/> Flag Cheer: Grades K & 1			
Pledge	<p>All football players and cheerleaders must read the following statement and sign agreeing that: <i>I will maintain at least a "C" average in school, abide by the official's decisions, show good sportsmanship, listen to my coaches and organization's officials, not use inappropriate language, and not damage or deface property, buildings or equipment.</i></p> <p style="text-align: center;">Player/Cheerleader Signature: _____</p>				
Procedures for Medical Treatment	<p>Emergency Contact and Insurance Information In the event of an injury to your child, it is necessary that you furnish the name of an emergency contact/relative who will assume temporary care of your child until you can be reached:</p> <p style="text-align: center;"> _____ Name of Emergency Contact Relationship to Child Phone Number of Emergency Contact </p> <p>Rochester Youth Football and Cheerleading (RYFC) has accident insurance coverage for medical and hospital expenses with a \$500.00 deductible for each accident incurred. This insurance is secondary coverage, following the parent's own medical insurance coverage. This coverage only applies to accidents directly related to authorized RYFC activities, events, or functions. Any injury that requires medical attention must be reported to team officials immediately and the proper claim forms filled out and submitted to the League office.</p> <p style="text-align: center;"> _____ Parent's Insurance Company Policy Number </p>				
<i>This Section for RYFC Official Use Only</i>	<u>Date Certified</u>	<u>RYFC League Official's Signature or Stamp</u>			

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

In consideration of participation in and/or with Rochester Youth Football, Inc. and it's League Members (herein-after referred to as "the League"), the undersigned (hereinafter "Releasor") agrees as follows:

1. I am the participant or parent and/or legal guardian of the "Participant" (listed on page 1). I have the legal authority to enter on behalf of Participant into this Release and Waiver of Liability, Assumptions of Risk and Indemnity Agreement (hereinafter the "Agreement"), with the intent to enter into a legally binding agreement, on behalf of Participant. I understand and agree that participation in the League activities and events (hereinafter referred to as "Activities") is voluntary and is conditioned upon my acceptance of registration and this Agreement, which will waive certain rights for both myself and Participant. Participant has requested to participate in the Activities and I, for myself and on behalf of Participant, agree as follows:
2. I understand the nature of the Activities and I hereby represent that Participant is qualified, in good health, and in proper physical condition to participate in such Activities. I give my permission and consent for Participant to take part fully in all Activities. I further represent that I have received clearance from Participant's medical doctor that Participant is medically allowed to participate in the Activities and that there are no medical limitations on Participant's ability to participate in the Activities. I acknowledge that if I and/or Participant and/or any physician treating Participant believe the Activities are unsafe for Participant, I or Participant will immediately discontinue Participant's participation in the Activities.
3. I fully understand that the Activities involve risk of serious bodily injury, including permanent disability, paralysis and death, which may be caused by Participant's conduct, by the conduct of others participating in the Activities, by the conditions in which the Activities take place, or by the conduct of the "Releasees" (identified below). I understand that the risks of participating in the Activities may be caused in whole or in part by: my own actions or inactions; the actions or inactions of other participants; the actions or inactions of spectators or other pedestrians; and/or the acts, inactions, or negligence of the Releasees. I also fully understand and acknowledge that there may be other risks arising from or associated with the Activities either not known to me or not readily foreseeable at this time and I on behalf of myself and participant fully accept and assume all such risks and all responsibility for losses, costs, and damages that I and/or Participant may incur as a result of Participant's participation in the League and its Activities.
4. In consideration for Releasee's provision of the opportunity to participate in the League, I for myself and on behalf of Participant, hereby forever release, discharge, and covenant not to sue Rochester Youth Football and Cheerleading, Inc., their Executive Officers, their League Members, respective agents, officers, directors, employees, volunteers, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activities takes place, (collectively and individually referred to herein as "Releasees") from all liability, claims, demands, losses, or damages on my account or on account of Participant caused or alleged to be caused directly or indirectly, in whole or in part by the Releasees conduct or Releasees failure to act or make safe or in any way arising from or related to Participant's participation in the League and the Activities or otherwise.
5. I further agree that if, despite this Agreement I, or anyone on my and/or Participant's behalf makes a claim against any of the Releasees, I will indemnify and save and hold harmless each of the Releasees from any loss, liability, damage, or cost which any may incur as a result of such claim. Releasor shall indemnify, defend and save and hold harmless, Releasees from and against all fines, penalties, claims, losses, costs, damages, suits and expenses including, but not limited to, attorney's fees, court costs and expert fees resulting from, caused or contributed by or in any way relating to or arising out of Participant's participation in the League or the Activities.
6. In the event of Participant injury, accident, or illness, I consent to Participant receiving emergency medical care and treatment as deemed advisable in the best judgment of appropriate League Member personnel and/or appropriate medical professionals. If necessary, I authorize appropriate League Member personnel to consent to such medical care and treatment on Participant's behalf. I agree to assume liability for any and all medical costs incurred as a result of Participant's participation in the Activities that are not covered by insurance, including but not limited to costs of: medical care and treatment, ambulance services, hospital stays, and physician and pharmaceutical goods and services. I agree to indemnify and hold harmless the Releasees from all liability for such costs.
7. I grant permission to Rochester Youth Football and Cheerleading, Inc. and its League Members to use Participant's photograph and/or any other record of Participant's participation in the Activities for any legitimate purpose. I understand that any and all photographs, motion pictures, recordings, and/or likenesses of Participant captured during the Activities by Rochester Youth Football, Inc., its League Members, its affiliated entities or contractors, and/or the media become the sole property of Rochester Youth Football and Cheerleading, Inc. I grant the right, permission and authority to Rochester Youth Football and Cheerleading, Inc. to use Participant's name and any such photographs, motion pictures, recordings, and/or likenesses for any legitimate purpose, including but not limited to promoting, advertising, and marketing activities. I further understand that Rochester Youth Football and Cheerleading, Inc., as sole owner, has the full right to sell and/or profit from the commercial use of such photographs, motion pictures, recordings, and/or likenesses.
8. The above-described release, discharge and covenant not to sue is made on my own behalf and on Participant's behalf and on behalf of my and Participant's heirs, executors, administrators, legal representatives and assigns and I recognize that my signature on this Agreement binds all such parties as well as myself.
9. I acknowledge that I have had the opportunity to review this Agreement with participant and with any advisor(s) of my choosing, including legal counsel, before signing it.
10. I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT and fully understand it. I acknowledge that I am giving up substantial rights - my own and/or those of Participant - by signing this Agreement and have signed it freely, voluntarily and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and that I have had an opportunity to consult with an attorney regarding the terms and advisability of signing this Agreement. I also agree that if any portion of this Agreement is held to be invalid, the balance of the agreement, notwithstanding such portions invalidity shall continue in full force and effect.

Date

Parent/Guardian Name (Print)

Parent/Guardian Signature