

Coaches WYFL- 2020

Parental consent waiver form

Mandatory participation form to be completed by Parent or Guardian of each Athlete or coach participating in any Westlake Youth Football League (WYFL) practice, speed and agility camp, workout, game, or event sponsored by WYFL.

Please read and agree to the terms and conditions of the waiver listed below: In consideration of being allowed to participate in any way in the upcoming WYFL season, and related events and activities, the undersigned:

I (Print Parent's Name) _____.

Son/daughter (Print Athlete's Name) _____.

Grade (for upcoming season): _____.

1. Agree that the parent(s) and/or legal guardian(s) will instruct the minor participant that prior to participating he or she should inspect the facilities and equipment to be used, and if the participant believes anything is unsafe, he or she should immediately advise his or her coach or supervisor of such condition(s) and refuse to participate. 2. Understand and acknowledge that as a result of participation, an injury could occur that may require medical attention, and that on occasion the coaches and staff of the WYFL, local area staff, and available medical personnel may be unable to contact me immediately for my consent for emergency medical care. I do hereby authorize the staff of WYFL to consent on my behalf as they may deem necessary to such emergency medical care, including ambulance transport and hospital care, as may be deemed necessary under the then existing circumstances by available medical personnel, including ordering injections and /or anesthesia and/or surgery. In so doing, I assume responsibility for the expenses of any such care not covered by my insurance. 3. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions, or negligence but the action, inaction, and negligence of others, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time. 4. Assume all the foregoing risks and accepts personal responsibility for the damages following such injury, permanent total disability, or death. 5. Release, waive, discharge and covenant not to sue WYFL or its coaches, their respective Administrators, directors, agents, and other employees of the organization, other members/participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors or premises used to conduct the event, all of which are hereinafter referred to as "releases" from any and all liability to each of the undersigned, his or her heirs and next of kin for any and all claims, demands, losses or damages on account of injury, including death and damage to property, caused or alleged to be caused in whole or in part by the negligence of the releases or otherwise. 6. I confirm my understanding and consent that by participating in WYFL coaches camp, my child/ward may be photographed, identified, and/or interviewed by people providing information for school publications or the media. I give my permission for WYFL and coaches to publish, on its website or in school publications, photographs and other information which may identify my child/ward related to my child's participation in WYFL Football. 7. Regarding COVID-19 I agree to not send my child at any time if they are sick, running a fever (above 100°F) or present any signs of being sick. My child will bring their own drink, water jug and will not share with any other person at any time. I will monitor and check my own child's health and not hold the WYFL, UYFC or any of its coaches liable for any sickness caused or conceived during football conditioning, activities, or workouts throughout the duration of the 2020 year. Myself and my child will adhere to state mandates for social distancing and hygiene policies set forth by the state of Utah regarding COVID-19.

I, the undersigned, being the parent or legal guardian of the child listed on this registration form, have read the above Waiver, Release of Liability and Medical Treatment Consent and agree with all the terms and conditions stated above.:

Parent/Guardian Signature: _____.

Date: _____.

Phone: _____.