



**NORTH FLORIDA YOUTH FOOTBALL CONFERENCE
NORTH FLORIDA YOUTH CHEER CONFERENCE
PARENT/GUARDIAN CONTRACT, PERMISSION & WAIVER**

2019

This form is to be completed by a parent or legal guardian of the minor child named at the bottom of this form (the "Participant") who will be participating in tackle football or cheerleading (collectively, the "Sport") during the year listed in the top right corner of this form. For purposes of this document, the Amateur Athletic Union shall be referred to as "AAU", North Florida Youth Football Conference and Youth Football Cheer Conference shall be referred to as the "Conference", and Orange Park Athletic Association, Inc. (also known as "OPAA") shall be referred to as the "Association".

1. **PERMISSION:** I, the undersigned parent or legal guardian of Participant, hereby declare that Participant is in good general health and grant my permission for Participant to participate in the Sport and all related activities. This may include transportation to and from activities by a licensed driver with proof of insurance.
2. **ASSUMPTION OF THE RISK AND WAIVER:** I hereby acknowledge that participation in tackle football and cheerleading/dance necessarily involves travel, play in adverse conditions and on irregular surfaces, contact with considerable force, and risk of serious injuries, including but not limited to: bruising; scrapes; strained, sprained or torn muscles, tendons or ligaments; broken bones; dislocation of joints; concussion; brain damage; nerve and spinal cord injury; permanent disability; paralysis; and death. I fully acknowledge and understand that protective and safety equipment does not prevent all injuries. For myself and on behalf of Participant, our heirs, assigns and next of kin, we willingly and voluntarily accept and assume all such risk. Furthermore, for myself and on behalf of Participant, our heirs, assigns and next of kin, we hereby waive, release, absolve, indemnify and agree to hold harmless AAU, the Conference, and the Association, including their employees, officers, board members, volunteers, officials, sponsors, supervisors, other participants, persons providing transportation and other representatives from any and all claims, demands, costs, expenses, and compensation arising out of any injury to Participant whether the result of negligence or for any other cause.
3. **AUTHORIZATION FOR MEDICAL TREATMENT:** I hereby authorize any and all emergency medical, surgical, and/or dental examinations and treatments to be administered to Participant, including authorization for first responders, medical treatment facilities and/or hospitals to administer emergency treatment, for any illness, injury or accident resulting from participation in any and all AAU, Conference and/or Association activities. I further authorize the coaches, team parents, and the emergency contact person I have identified on the registration form, as well as other officials of the Conference and Association to act as agents in the capacity of supervisors and vehicle drivers, and to provide first aid and CPR on Participant if needed.
4. **AAU MEMBERSHIP:** I understand that an AAU Extended Coverage Membership may be purchased for Participant prior to any participation in AAU, Conference or Association activities related to the Sport. I am aware that it is at the discretion of the Association whether parents will purchase the AAU Extended Coverage Membership or if the Association will purchase the membership for its Participants, in which case I hereby authorize the Association to purchase the membership for and on behalf of Participant and to accept any and all membership terms on behalf of myself and Participant.
5. **PHOTO RELEASE AND COMMUNICATION CONSENT:** I hereby grant AAU, the Conference, and the Association, including their representatives and designees, the perpetual right to use Participant's name and likeness, any photograph, film, videos, recordings, and/or other depictions or images in any form or media in connection with Participant's participation in any AAU, Conference and/or Association activities, including but not limited to practices, games, competitions, team gatherings, fundraisers, etc., to be used for advertising, promotion, or any other purpose whatsoever. I further consent to receive communications via email and mail from AAU, the Conference, and the Association, including their affiliates and partners (which may include local high school athletic departments and local camps relevant to the Sport).
6. **INSURANCE:** I understand that AAU, the Conference, and/or the Association offer group health insurance, however this insurance is to be considered secondary or excess for medical purposes. Any and all valid insurance that I possess will be considered the primary insurance. I agree to provide notice to the Association as soon as possible if I will be filing a medical claim as a result of Participant's participation in any AAU, Conference and/or Association activity.
7. **EQUIPMENT AND FINANCIAL RESPONSIBILITY:** I agree to assume full responsibility for all equipment and/or uniforms issued to Participant by the Association and I agree to promptly return, upon request, all equipment and/or uniforms loaned to Participant. I agree to immediately reimburse the Association for any lost or damaged (other than normal wear and tear) equipment and/or uniforms. I further acknowledge that all registration fees and deposits are set by the Association and I have been advised of and agree to the refund policies, if any, for such costs. I also acknowledge that admission fees will be charged for spectators at AAU, Conference and Association activities, including but not limited to games, jamborees, tournaments and competitions.
8. **CODE OF CONDUCT: (1)** I hereby agree to encourage good sportsmanship by demonstrating and providing positive support for all participants, coaches, volunteers, officials and other parents/guardians at every game, practice, competition or other AAU, Conference and/or Association activities. I will not use vulgarity or profane language, throw objects, make threats, or verbally or physically assault anyone during these activities. **(2)** I agree that I will not use any tobacco, non-prescription drugs or alcohol during any AAU, Conference and/or Association activities nor may I appear intoxicated. **(3)** I understand that I will not be allowed on the field/mat for games, practices or competitions unless I have been approved and certified as a volunteer for the current season and am wearing my issued badge. **(4)** I understand that the Association may require me, as many times as needed, to work in the concession stand, gate duty, holding chains, play counting on the field, bringing snacks/drinks, fundraising activities, park clean-up, or other areas where needed. I hereby agree to fulfill all of these requirements.
9. **RULES AND REQUIRED DOCUMENTATION:** I hereby agree to comply with all AAU, Conference and Association rules and policies, including the Code of Conduct above, and I fully understand that failure to comply may result in discipline and/or dismissal of Participant, myself, and/or any other persons affiliated with myself and Participant. I further agree to provide all required documentation to the Conference and/or Association, including this document, the Participant Registration Form, a copy of Participant's certified birth certificate, a physical examination form completed and signed by a medical professional in the same calendar year as this form, and any other documents AAU, the Conference or Association may require. I understand that Participant will not be allowed to participate until all documentation is submitted and approved.
10. **DISPUTE RESOLUTION AND SEVERABILITY:** I hereby understand and acknowledge that all civil disputes between myself/Participant and the Conference and/or the Association, or any affiliated parties, shall be subject to binding arbitration, in lieu of any litigation between said parties. The binding arbitration shall be in the Northeast region of Florida in accordance with Florida law under the guidelines and rules of the American Arbitration Association. I also understand that if I contest any ruling of the Conference and/or Association and seek other recourse, I will reimburse any legal fees and expenses they reasonably incur. If any portion of this form shall be deemed unenforceable, illegal and/or invalid, the remainder shall remain in full force and effect.

I hereby confirm that I have read, fully understand and voluntarily agree to all of the above terms in consideration of Participant's participation in AAU, Conference and Association programs.

Participant's Name (as it appears on his/her birth certificate): _____

Parent/Legal Guardian Name (Printed) _____

Parent/Legal Guardian Signature _____

Date: _____



NORTH FLORIDA YOUTH FOOTBALL CONFERENCE
NORTH FLORIDA YOUTH CHEER CONFERENCE
PARTICIPANT REGISTRATION FORM

2019

Participant Full Name: _____
(as it appears on birth certificate) FIRST MIDDLE LAST

Nickname: _____

Participant's Address: _____
Street

City

State

Zip

Participant's DOB: _____ / _____ / _____ Participant's Weight: _____ lbs.
MM DD YYYY (for football only)

Participant's Grade Level _____ Sport: ___ Tackle Football ___ Cheer/Dance
(for 2019-2020 school year)

Does Participant have any allergies or special conditions? ___ Yes ___ No (if yes, please describe below)

Parent/Guardian Information:

Parent/Guardian 1	Parent/Guardian 2
Name: _____	Name: _____
Phone: _____	Phone: _____
Email: _____	Email: _____
Relationship: _____	Relationship: _____

Emergency Contact Information: (in case Parent/Guardian cannot be reached)

Name: _____
Phone: _____
Email: _____
Relationship: _____