Hernando Youth Football Association

Player / Cheerleading application form

www.hernandoyouthfootball.com

Child's Name	Birthdate			
Parents' names				
Address				
Primary emailSec	condary email			
Primary phone Seconda	ary phone			
Note: Your child's age on Aug 1, 2011 will determine the bracket in which he or she participates Age Brackets (please circle one) 5-6 flag, 7-8, 9-10, 11-12				
Would you like to Coach/Asst Coach? (please circle one)YNEmergency Contact Information other than parent or guardian				
Name: Relat	ionship to child:			
Phone number:				
List any medical conditions:				
In consideration of the the child listed above, being allowed to participate in any way in the Hernando				

Youth Football Association related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1)The risk of injury to my child from the activities involved in these programs is significant, including the potential for permanent disability and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist, and, 2)FOR MYSELF, SPOUSE, and CHILD, I KNOWLINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASES or others, and assume full responsibility for my child's participation, and,

3)I willingly agree to comply with the program's stated and customary terms and conditions for participation. If I observe any unusual significant concern in my child's readiness for participation and/or in the program itself. I will remove my child from the participation and bring such attention of the nearest official immediately, and,

4)I myself,my spouse,my child, and on behalf of my/our heirs,assigns,personal representatives and next of kin, HEREBY RELEASE THE other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my child's involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law. 5)I, for myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives, and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releasees from any and all liabilities incident to my involvement or participation in these programs, EVEN ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT INDUCEMENT.

Hernando, MS 38632

Parents Name (Please Print)

Hernando, Ms 38632

Parent's signature _____ Date ____

Participation Fee: \$75 by August 1st

Participation (circle one)	Football	Cheerleading	
Please remit to: all ch	ecks payable to "	Hernando Youth Football"	
Hernando Youth Football	-or-	Sports Of All Sorts 345 East Commerce	
4745 Getwell Rd S		345 East Commerce	

cash