## **Participation Contract, Tracking and ID Card - Page 2**

Last Name First Name	Initial Preferred	d (nick) Name
Street Address City /	Town State	Zip Code Home Phone
Date Of Birth (M/D/YR) Age as of 7/31	Parent/Guardian Fir	rst Name Parent/Guardian Last Name
Grade in Fall School in Fall School Phone Home Email Address		
Grade III all Scriot III all Scriot III all Scriot I II all Address		
Medical Insurance (circle one) Name Of Insurance Carrier Policy #		
YES / NO		
Football: Cheer:CHECK	ONE Registration Fee:	\$ Check# Cash:
GRAY AREAS FOR OFFICIAL USE ONLY !!		
Association:	Division:	Team:
Jersey Numb	per Assigned: Equipm	ent / Uniform Issued Returned
PERMISSION TO PARTICIPATE  I acknowledge that I am fully aware of the potential dangers of participation in any sport		
and I fully understand that participation in football, cheerleading, dance and/or step may result in SERIOUS INJURIES, PARALYSIS, PERMANANET DISABILITY AND/OR DEATH. Furthermore, I fully acknowledge and understand that protective equipment does not prevent all participant injuries. I, the parent/guardian of the above-named participant, do hereby give my approval for my child/ward to participate, and further assert that I have verified with my child/wards' physician, and in my opinion, my child/ward is physically fit and can participate without limitation in any and all Local, Regional, National, League/Conference, Association and team/squad activities, including transportation to and from the activities by a licensed driver.		
activities by a licensed driver.  SCHOLASTIC FITNESS		Initial:
I am of the opinion that my son/daughter/ward is scholastically fit and would benefit by participation in this program. I agree to submit a copy of my son/daughter/ ward's last completed grade, end of year/last complete report card or a written statement of scholastic fitness from the school administration.  HELMET WAIVER (for football participants)		
We acknowledge, AND WE understand the	risks involved in my CHII D/WAI	RD my playing FOOTBALL which is a
collision sport; the NOCSAE committee has adopted the following warning to be read by, and signed by, both the parent/guardian and participant. "DO NOT USE THIS HELMET TO BUTT, RAM OR SPEAR AN OPPOSING PLAYER, THIS IS IN VIOLATION OF FOOTBALL RULES AND CAN RESULT IN SEVERE HEAD, BRAIN OR NECK INJURY, PARALYSIS OR DEATH AND POSSIBLE INJURY TO YOUR OPPONENT, THERE IS A RISK THAT THESE INJURIES MAY ALSO OCCUR AS A RESULT OF AN ACCIDENTAL CONTACT WITHOUT INTENT TO BUTT, RAM OR SPEAR, NO HELMET CAN PREVENT ALL SUCH INJURIES."		
EQUIPMENT UNIFORM RESPONSIBILITY	Parent/Gu	ardian Initial: Player Initial:
I assume full responsibility for any and all equipment/uniforms loaned to my child/ward and I agree to promptly return, upon request, the uniform and other equipment in as good condition as when received except for normal wear and tear. If I fail to adhere to this policy, I will be responsible for and promptly pay the replacement cost of such equipment.  CODE OF CONDUCT  Initial:		
The Ideology Of Youth Sports Including This Program Is To Promote Good Understanding And Fundamental Knowledge Of The Sport. It Is Also Critical That Good Sportsmanship Including The Ability To Always Conduct Oneself In An Appropriate Manner Of Positive Accord Both On And Off The Field. It Is Understood That Any Incident Considered Detrimental To The Pursuit Of This Ideology Will Not Be Tolerated. It Will Be Addressed In Accordance With The Statutes Of The Association, Conference, Current National Affiliation, State and Local Laws, And May Result In Dismissal From The Program And The Inability To Participate In Any Future Related Activities Of The Association. This Code Of Conduct Applies To All Involved With The Program Including But Not Limited To, The Football Players, Cheerleaders, Spirit Participants, Parents And Guardians.		
PRINT Parents/Guardian Name:	Parents/Guardian Signature:	Date Signed:

**NOTE:** This form as with any and all forms used by your Association should be reviewed by your local counsel for compliance with any state or local statutes. This form should be kept on file for a minimum of 7 years.