

Bryan Youth Football Association

2020 Participant Contract and Parental Consent Form

Football Registration cost \$225.00 (No refunds will be issued after purchase of jerseys if the season is canceled due to a pandemic or other alternate event)

Activity / Football	Pick 3 Jersey #'s		
Legal Name of Participant	(must match birth certifica	te) Returning player (yes o	or no)
_ast First		Middle	
Address			
City			
Birth Date	Age (as of July 31	, 2020)	
School Attending:			
Name of Parent/Guardian		Relationship to athlete	
Phone/Cell #	Email Address	š	
Do you have personal or group in	surance? Yes _	No (if Yes, then	complete)
Name of Insurance			
Emergency Contact Inform	nation (if the parent/guar	dian cannot be reached):	
Name	Relation	ship to athlete	
Home phone #	Cell or Work #		
Official Use Only:	S J	v v	
Registration Number		Witnessed by	
Fee Amount paid \$		oate	
Cash Check #	Money order	Credit Card	_ PP
Equipment Deposit \$150 f	or Football		
Cash	Check #		
<u>Documents Received</u>			
Birth Certificate Medical Physical Form Parent/Guardian Consent and Player and Parent/Guardian Bo	Waivers	Vaiver/Release for Covid-19 ayment Plan Agreement	



BYFA Parent/Guardian Consent and Waivers

Bryan Youth Football Association Liability Waiver

I, the parent/legal guardian of the child listed on this registration form, hereby give permission for him/her to participate in any and all Football/Cheer related activities during the current season. I assume all risk of hazards incidental to such activities. I hereby release, waive, and hold harmless the **Bryan Youth Football Association** and **Pride of Texas Youth Football Alliance**, it's respective organizers, directors, and coaches from any claims arising out of any injury or damages incurred during or in -route to such activity.

Signature of Parent/Guardian	Print Full Legal Name
Date, 2020	Initial of Acknowledgement
risk described and not described herein. I agree to and	m, there is a chance of physical injury. I agree to assume all hereby do release and discharge Bryan Independent School any and all claims, demands, causes of action and suits, or uding acts or omissions constituting negligence.
BISD Hold Harmless Agreement I, the parent/legal guardian of the child listed on this re and give my full consent for his/her participation in the (Tackle Football/Cheer).	Initial of Acknowledgement gistration form, hereby agree to the terms of these releases following programs: Bryan Youth Football Association
= :	claim, which I may have or acquire individually or as guardian . I make these waivers and releases to legally bind myself, st extent now and in the future.
risk described and not described herein. I agree to and \ensuremath{h}	m, there is a chance of physical injury. I agree to assume all thereby do release and discharge the City of Bryan , its officials, ands, causes of action and suits, or liabilities, which may arise astituting negligence.
	rgistration form, hereinafter referred to as PARTICIPANT , do my full consent for his/her participation, in the Bryan Youth
	Initial of Acknowledgement
	tion form, in he event of my absence, do hereby give m permission rs to authorize any medical attention required when an injury has
	Initial of Acknowledgement



BRYAN YOUTH FOOTBALL ASSOCIATION

FOOTBALL & CHEERLEADING

Player & Parent/Guardian Behavior Rules & Regulations

LOCAL RULES & POLICIES:

The Bryan Youth Football Association (BYFA) has the right to implement rules and policies deemed necessary to ensure smooth management and integrity of the program (Football/Cheerleading)

- Attendance in School: Any player absent from school should not be taking part in practice sessions/games. Head Coaches and parents will judge individual cases and participating in a practice or game will be up to the discretion of the parent/guardian.
- 2. Registration/Medical Forms: Each athlete must have a signed parental consent form on file in order to participate. All athletes are required to have medical approval prior to the first game of the season.
- 3. Responsibility for Equipment: Athletes are required to return, in acceptable condition, all equipment issued to them or to reimburse BYFA at current replacement cost of said equipment.

TEAM RULES:

- 1. Smoking, using smokeless tobacco, drinking alcoholic beverages and/or using drugs or narcotics of any kind is not permitted during BYFA events.
- 2. Attendance at all practices and games is expected unless absence has the prior approval of the coach.
 - 3. Vandalism, destruction, or theft of private/public property or BYFA equipment is not permitted.
 - 4. The following behaviors are unacceptable:
- a) At any BYFA event, practice or competition, any adult who: 1) verbally abuses; 2) attempts to intimidate; 3) is flagrantly rude; or 4) cannot control their language or actions with an official, coach, BYFA volunteer or other spectators will be asked to leave the BYFA event. He or she will receive a written warning regarding their behavior. His or her child(ren) will be immediately removed from the BYFA event.
- b) Any adult that commits a second similar offense will be banned from BYFA events for the remainder of that season and their child(ren) removed from BYFA for the remainder of that season. Association will not refund monies.
- c) Any adult who physically assaults an official, coach, BYFA volunteer or other spectator will be banned from the BYFA and their child(ren) removed from the BYFA program for one year from the date of the offense, The child(ren) may not participate in another BYFA event during the sanction period.

After one year, the parent may apply for re-instatement of his or her child. If the adult commits a second offense, he or she will be permanently banned from BYFA and the child(ren) permanently removed from BYFA. The term physical assault includes, but is not limited to, hitting, slapping, pushing, spitting, kicking or striking in any way with any part of the body or any physical implement.

AGREED TO BY PARENT/LEGAL	GUARDIAN.	
(Signature)	(Print Name)	(Date)
AGREED TO BY FOOTBALL PLAY	ÆR:	
(Signature)	(Print Name)	

ACREED TO BY DARENT/LECAL CHARDIAN.



WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19

ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT

In consideration of being allowed to participate on behalf of **Bryan Youth Football Association** athletic program and related events and activities, the undersigned acknowledges, appreciates, and agrees that:

- 1. Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,
- 2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
- 3. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe and any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
- 4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS **Bryan Youth Football Association** their officers, officials, agents, and/or employees, 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 ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, 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 IF FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

This is to certify that I, as parent/guardian of responsibility for this participant, have read and explained the promy child/ward including the risks of presence and partices responsibilities for adhering to the rules and regulations for prodiseases. Furthermore, my child/ward understands and accepts I for myself, my spouse, and child/ward do consent and agree to for all the Releasees and myself, my spouse, and child/ward do and hold harmless the Releasees for any and all liabilities incorpresence or participation in these activities as provided above, ENEGLIGENCE, to the fullest extent provided by law.	ovisions in this waiver/release to cipation and his/her personal rotection against communicable these risks and responsibilities. In his/her release provided above release and agree to indemnify ident to my minor child's/ward's
Parent guardian/signature:	Date Signed
Printed Name of parent/guardian:	

(The signed waiver/release should be kept on file by the sports organization for at least 7 years and possibly longer if the player has contracted a serious illness.)