



City of Fresno
Parks, After School, Recreation and Community Services
Adult Sports

AUTHORIZATION FOR A MINOR TO PARTICIPATE IN
A CITY OF FRESNO ADULT SPORTS LEAGUE

Minor's Name:	Birth Date:	Phone #:
Address:	City:	Zip:

Parent's Name:	Phone #:	Work #:
Team Name:	Game Night:	

I hereby authorize the above named child to participate in the activities associated with the City of Fresno Adult Sports Program.

I furthermore waive, release, and discharge any and all claims for damages, for death, personal injury, or property damage which the above named child or I may have, or which hereafter accrue to the above named child or me, against the City of Fresno as a result of the above named child's participation in the City of Fresno Adult Sports Program. This release is intended to discharge the City of Fresno, its agents and employees, individuals affiliated with this program, and any other involved municipalities or public entities from and against any and all liability which may arise out of the negligence on the part of persons or entities mentioned above. **I further understand that accidents and injuries can arise out of the above child's participation in the City of Fresno Adult Sports Program such as, pulled or strained muscles, foot and ankle injuries, and any and all injuries associated with increasing heart rate, however, knowing the risk, nevertheless, I hereby agree to assume those risks and to release and to hold harmless all the persons or entities mentioned above who (through negligence or careless) might otherwise be liable to the above named child or me (or the above named child's heirs or assigns) for damages.** It is further understood and agreed that this waiver, release, and assumption of risk is to be binding on the above named child's heirs and assigns.

I further understand that without this waiver form, my child will not be allowed to participate in the activity and any fees prepaid will not be refunded.

Signature of Parent/Guardian

Date

Print Name: _____