Orange Bowl Youth Football Alliance

Football/Cheer (Circle One) Registration Card

PARK/ORGANIZATION:				LEAGUE:			
• STUDENT-ATHLETE:			• DATE	OF BIRTH:			
• MAILING ADDRESS:				• AGE:			
• CITY/STATE/ZIP:				COUNTY:			
• PRIMARY PHONE:				SEASON:			
• SCHOOL:				• GRADE:			
Abbre	S MUST BE ENTERED A viations: OK – Made Weight; OW –	Overweight;		TEAM	WEIGHT	JERSEY # /	
1/	5/	tion Not Complete; DISC Player Disciplined 11/ PLACE PHOTO HERE				RE	
2/	6/	12	_/				
3/	7/	13	_/				
Player has been OK or must be Moved up or out (ineligible)	8/	14					
4/	9/ 10/	15 16					
I certify that the information provided is true and the photo is recent. A lie may result in forfeiture of games and any misinformation may result in disciplinary action.							
Head Coach Signature:		Date:	_//				
PARK COMMISSIONER CHECKED BY:				LEAGUE OFFICERS/BO	OARD MEMBERS ON	_Y	
PARK NAME:	DATE:	_//	CERTIFIED BY:		DATE	://	

PLACE COPY OF BIRTH CERTIFICATE HERE AFTER PARENT/LEGAL GUARDIAN HAS READ AND SIGNED MANADATORY WAIVER AND RELEASE

WAIVER AND RELEASE:

In consideration of the undersigned participant ("Participant") being allowed to participate in the various Youth Football Alliance events, activities and games (the "YFA Events"), and understanding and acknowledging that O.B. Youth Sports, LLC (the "OBYS") is a non-profit limited liability company which is receiving no monies or other monotary benefit for providing promotional and sponsorship support for the YFA Events and is expressly relying on this Waiver and Release in allowing Participant is the YFA Events, we, the Participant and the parent(s) and/or legal guardia(s) of the Participant, jointly and severally, and intending to legally bind ourselves and the Participant, and on behalf of our respective spouses, ex-spouses, grandparents, family members, guardians, heirs, executors, personal and legal representatives, estates, beneficiaries, administrators, successors and assigns (all of the foregoing collective), the "Releasors"), do hereby waive, release and discharge, and covenant not to sue, the OBYS, its member and managers, the Participant's League and Park, the owners, lessoes, and/or paragers of any public and/or private facilities or sites used for the YFA Events, YFA sponsors, officias, and all of their respective affiliates, officers, directors, trustees, shareholders, members, members, members, employees, staff, volunteers, agents, contractors and supervisors and their successors and assigns (all of the foregoing collective), the "Releasees") from any and all liability and/or claims for illnesse, injuries, disability, paralysis, death and/or damages that may arise directly or indirectly or a secult of Participant in the YFA Events, including, without limitation, any rights, claims, causes of action, suits, liabilities, especies or virus (including, without limitation, any rights, claims, causes of action, suits, liabilities, especies or virus (including, without limitation, any rights, claims, actions action, suits, liabilities, especies or virus (including, without limitation, attravers) areases

The Releasors agree that the OBYS does not control, conduct or manage the YFA Events. The Releasors are aware of, and understand fully, the inherent risks involved in connection with football and cheerleading (meaning those dangers or conditions, known, which are characteristic of, intrinsic to, or an integral part of the activity and which are not eliminated even if the activity provider acts with due care in a reasonably prudent manner). The Releasors also fully understand that each of football and cheerleading is a violent sport and that serious injury, concussions and death have occurred, and each of them assume full, sole and complete responsibility, for an integral part of the activity and which are not eliminated even if the activity provider acts with due care in a reasonably prudent manner). The Releasors also fully understand that each of form, in connection with, or in any way related to, Participant's participation in the YFA Events. The Releasors further acknowledge that other participants, referees, officials, bystanders, members of the public and others may act irresponsibly, engage in unsafe conduct or to the detiminent of the health and wellbeing of the Participant; that Releasees are not the owners, operators or managers of the facilities or sites where the YFA Events take place and that there may be latent or patent defects in or around such facilities or sites; that any of the Releasors and each of them voluntarily and knowingly assume such risks and waive, release and discharge, and covenant not to sue, the Releasers or any of them with respect the net.

NOTICE TO THE MINOR CHILD'S PARENTS/NATURAL GUARDIANS:

READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF RELEASEES USE REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM RELEASEES IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND RELEASEES HAVE THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

By their execution below, understanding that the Releasees are relying hereon in allowing Participant to participate in the YFA Events, the Releasors hereby represent and warrant to the Releasees, that (i) all of Participant's living parents and/or legal guardian(s), as applicable, have duly signed this General Release and Waiver, and (ii) Participant has no medical condition (physical or mental) which would or could impact on the Releasees allowing Participant to participate in the YFA Events and that the Participant is physically able to participate in the YFA Events, and (iii) the Participant is not taking any herbal or medicinal supplement or prescription that could impact on Participant is physically able to participate in the YFA Events.

The Releasors hereby authorize the OBYS and its affiliates to take videotapes and photographs of Participant and to record Participant's voice, conversations and other sounds during and in connection with the YFA Events. The Releasors acknowledge and agree that the OBYS and its affiliates shall own exclusively all copyright and other rights in and to such tapes, photography, and recordings and may use them forever and throughout the world in any manner without compensation to the Releasors. The Releasors authorize the OBYS and its affiliates to use his name, voice, likeness, and any biographical facts provided to the Releases in promoting the YFA Events without further compensation.

Comes now,	and	(Parent(s)/legal guardian's name) of full age, each being duly sworn and upon his/her oath, disposes and each says that:				
1. I am the parent(s)/legal guardian of		(the "Participant") named on the front side of the card. The information about my child's name, date of birth, age, addresses and school				
information on the front side of this card is correct and the photo is my child. Any misstatement made about my child's name, date of birth, age or school information may result in criminal prosecution.						

3. I have fully read and understand the terms of this Waiver and Release and been encouraged to seek legal counsel and have either obtained legal counsel or intentionally refrained from doing so and knowingly and voluntarily waive such right. I consent to my child's participation in the YFA Events provided by the League and ______ (the "Park").

PLEASE CHECK BELOW IF THE UNDERSIGNED AUTHORIZES EMERGENCY MEDICAL TREATMENT BE USED ON PARTICIPANT, PROVIDED, THAT, IT IS FURTHER ACKNOWLEDGED THAT NO MEDICAL TREATMENT MAY BE AVAILABLE.

I Agree

Emergency Contact

Name:	Phone Number:	Ēmail:	Ēmail:				
Parent(s) or court-appointed legal guardian(s) m IN WITNESS WHEREOF, the undersigned, indiv	ust sign for any participating minor (those under 18 years of ag vidually and on behalf of the other Releasors and intending to be	e) and agree that they and the minor are subject to all the t e legally bound, have executed this General Release and ¹	erms of this document, as set forth above. Waiver this day of	20			
Parent(s) and/or Legal Guardian(s) (MUST be	signed by both parents (if living) and/or All Legal Guardian	ns):					
PARENTS:		WITNESSES:					
•	•	•	•				
Signature	Print name	Signature	Print name				
	•	•	•				
Signature	Print name	Signature	Print name				
 Print or Type Participant's Full Name: 							
Participant's Address:		Ē	mergency Phone No:				
	1						
NOTARY – Initial Below	Sworn to and subscribed before me this day of, 20 as to the truthfulness of the statements set forth above						
who is personally known to me	and acknowledge as being his/her free and voluntary act as for the uses and purposes set forth therein.						
who produced identification							
(Type and Id)	NOTARY PUBLIC, STATE OF FLORIDA, _	COUN	ΤY				