

**FREDERICK COUNTY YOUTH SOCCER ASSOCIATION
MEDICAL RELEASE AND WAIVER OF LIABILITY**

_____ has my permission to participate in the FCYSA/LUYAA sponsored practices, events and games. I realize by participating in these activities, he/she may become injured. I certify that he/she is physically able to participate in a competitive soccer program.

I give my permission for any and all medical attention necessary to be administered to the above named participant in the event of an accident, injury or sickness, under the direction of the authorized person(s) named below until such time as I may be contacted. I also assume responsibility for payment of any such treatment.

In consideration of being permitted to participate in soccer activities, I do hereby for myself, and as parent and/or legal guardian of _____, my heirs, executors, administrators, agents and assignees release and forever discharge event sponsors, coaches, and the LUYAA organization, The Soccer Official Services, the Frederick County Youth Soccer Association, their agents, predecessors, successors and assigns, and all other persons involved in organizing and managing these events from all claims, demands, losses, damage actions, cause of actions or suits at law or in equity of whatsoever kind of nature, arising out of soccer activities, including without limitation, any claims for personal injuries or losses to the aforementioned participant, which I may otherwise be able to assert either on my own behalf or on behalf of that aforementioned participant.

MOTHER'S NAME _____ PHONE _____

FATHER'S NAME _____ PHONE _____

INSURANCE CO _____ POLICY # _____

OTHER CONTACT PERSON/PHONE# _____

PHYSICIAN _____ PHONE _____

KNOWN ALLERGIES _____

MEDICATIONS/CONDITIONS _____

PRINT PARENT/LEGAL GUARDIAN NAME

PARENT/GUARDIAN SIGNATURE

DATE

Parents / Guardians Code of Ethics

- ❖ I will encourage good sportsmanship by demonstrating positive support for all players, coaches, and officials at every game, practice, or other youth sports event.
- ❖ I will place the emotional and physical well-being of my child ahead of a personal desire to win.
- ❖ I will insist that my child play in a safe and healthy environment.
- ❖ I will support coaches and officials working with my child, in order to encourage a positive and enjoyable experience for all.
- ❖ I will demand a sports environment for my child that is free of drugs, tobacco, and alcohol, and will refrain from their use at all youth sports events.
- ❖ I will remember that the game is for youth-not for adults.
- ❖ I will do my best to make youth sports fun for my child.
- ❖ I will ask my child to treat other players, coaches, fans, and officials with respect regardless of race, sex, creed, or ability.
- ❖ I promise to help my child enjoy the youth sports environment by doing whatever I can, such as being a respectable fan, or volunteering to work in the organization.

Parent / Guardian Signature

Date