

PARTICIPANT CONTRACT AND MEDICAL FORM FLAG FOOTBALL

CLEVELAND MUNY FOOTBALL LEAGUE



PLACE
PICTURE
HERE

Age cutoff is as of July 31 of the current year (as per Youth NFL Flag Guidelines).

TERMITE **JUNIOR** **PEEWEE** **Jr BANTAM** **BANTAM**
 5-7yr **8-9yr** **10-11yr** **12yr** **13-14yr**

Team Name _____ **Year** _____ **Football** _____ **Cheerleader** _____
Child's Name _____ **Age (as of 7/31 this year)** _____ **Date of Birth** _____
Address _____ **City/Town** _____ **State** _____ **Zip** _____ **Ward** _____
Phone _____ **Emergency** _____ **Current School** _____
Grade in Spring _____ **e-mail address** _____ **Participated last year** Yes No

Medical Service Agreement and Liability Waiver

I hereby agree for my child to play with the team herein mentioned under the rules and regulations of the Cleveland Muny Football & Cheerleading League during the playing season of 20__ unless otherwise assigned by the Cleveland Muny Football League. I certify that my child is not a member of any other team in this or any other league and all information given on this contract is true and any contract falsification shall result in my child's automatic suspension from the Cleveland Muny Football League for one calendar year.

On behalf of my student athlete, cheerleader _____ I hereby release the Cleveland Muny Football League and the City of Cleveland of any and all medical, dental or hospital expenses incurred during all practices, on the field of play or during transporting of players and cheerleaders while participating in any scheduled Cleveland Muny League activities. Participant/parent fully and release, discharges Cleveland Football League, its subsidiaries, director, officers, employees, insurers, sponsors, facilities, and vehicles, and all organizations involved in league activities from any and all injuries including (death), losses, damages claims, (negligence claims), lawsuits, and any other activities, including transportation related to the event.

Name of Medical Insurance Carrier _____ **Policy #** _____ However, the Cleveland Muny Football League carries secondary Health Insurance. Only the organization's staff members i.e. coaches and or parents of said organization shall transport their organization's players and cheerleaders with the proof of a valid driver's license and insurance to and from practices, fields of play and events related to Cleveland Muny League scheduled activities.

EMERGENCY MEDICAL RELEASE: I/We the parents of applicant give our permission for Any Emergency Treatment Necessary either on the practice field or on the game field. I/We authorize any hospital and/or physician to perform emergency treatment for any injuries resulting from any scheduled Cleveland Muny Football League functions.

"Children Grow Up To Become What They Learn"

This agreement is intended to establish and sustain a positive environment for the youth who participate in our program.

1. I will not force my child or any child to participate in Youth Football or Cheer.
2. I will assist the Association in teaching my child and others in this league that rules are important and will instill in the child that rules are important.
3. I understand that children learn best by example and that I will always attempt to set a good example for my child and any other children who participate or have any involvement with CMFL.
4. I will teach my child that victory is important and that honesty and hard work are equally rewarding.
5. I will teach my child that one individual cannot win a team competition.
6. I will teach and demonstrate by example the importance of good sportsmanship in victory and in defeat.
7. I will not publicly question the honesty, integrity or judgment of the volunteer coaches or other adult volunteers.
8. I understand that verbal and physical abuse is not to be tolerated against anyone in this league, verbal abuse includes profanity, and foul language.
9. I understand that racial epithets or negative innuendo related to a person's race, religion or ethnicity will not be tolerated.
10. I recognize that respect among adults is necessary for success in this league and that all adult volunteers are entitled to respect, as are the children.
11. As a Parent, Guardian or Spectator, I will responsibly handle disagreements. I agree not to engage in divisive activity such as verbal and physical confrontation. I will not create conflict by slander, malicious rumors, or threats. Nor will I entice another to do so. I agree to submit any complaints to my local organization first, and to the Director of CMFL as a last resort. Complaints to CMFL must be in writing (letter mail, or email).

By signing below, I understand that if I violate this agreement, I will be subject to disciplinary action, which could include probation, suspension, and expulsion from Cleveland Muny Football League activities or a monetary fine to my home association.

I have read and reviewed the above information and do hereby agree to allow my child to participate in the Cleveland Muny Football League Flag FB Program.

_____ * Coaches Signature _____ *Parent/Guardian Signature _____ Print Name _____ Date