AUTHORIZATION AND RELEASE OF LIABILITY

PLEASE READ CAREFULLY AND SIGN BELOW TO INDICATE YOUR AGREEMENT.
NOTE: THIS FORM INCLUDES A RELEASE OF LIABILITY.



Please review and complete the section below and sign in the space provided to indicate your agreement with all statements made in such sections.

AUTHORIZATION AND RELEASE OF LIABILITY

I, the parent/guardian of the above-named participant(s), authorize the participation of my child (or children) in the Brenham Flag Football League.

I understand that this program is a nonprofit program for youth and that my child's (children's) participation is voluntary and not essential to completion of requirements of any program, school or government agency. I understand that the Program is conducted by Brenham Flag Football League and its volunteers, including parents of other participating children. I further understand and agree that my child's (children's) participation in athletic and other activities necessarily involve the risk of injury and even death from various causes, including but not limited to accidents, fall, strenuous and prolonged physical activity, dehydration, illness, collision or dispute with other participants, weather related injuries, playing area and equipment defects, and negligence of coaches and referees. On behalf of my child (or children), my family and I, I assume these risks. In consideration of the privilege of my child's participation in the program, and on behalf of my child (or children) and me as parent/guardian, I hereby release, discharge, hold harmless and indemnify, and covenant not to sue Brenham Flag Football League, its directors, officers, deacons, employees, volunteers, insurers, agents and representatives, and all other persons associated with the Brenham Flag Football League (including without limitation any other participating sponsors, parents, vendors, coaches and other game and event workers, officials, drivers, and organiza-

tions) as to any and all claims of my child (children), me and other family members for personal injuries suffered by my child, property damage, medical expenses, and economic loss arising directly or indirectly out of my child's (children's) participation in the Brenham Flag Football League, and any first aid, medical care or treatment provided to my child in the event my child is injured or becomes ill while participating in Brenham Flag Football League activities, and excepting claims that may not be released under applicable law. This Release of Liability shall be as broadly construed as allowed by law to include all claims and rights that the child (children), that I as parent/guardian, and that other family members may have. I am a legally responsible parent or guardian of my child (children). If any provision of this Release of Liability is deemed invalid, the remaining provisions shall remain in full force and effect. This Release of Liability shall be binding on me, my family, heirs, next of kin, legal representatives, beneficiaries, successors and assigns I hereby authorize Brenham Flag Football League to use, reproduce, distribute, display, and to license others to use, reproduce, distribute, and display, my child's image, and photography, as well as any video, digital, or audio recording or reproduction, in connection with external and internal communications of Brenham Flag Football League for the sole purpose of advancing Brenham Flag Football League. I acknowledge and consent that registration will allow Brenham Flag Football League to obtain access to personal information regarding me and my child participant(s).

PARTICIPATION AND SAFETY

I understand that participation in Brenham Flag Football League may involve strenuous and prolonged physical activity. I agree that my child (children) is/are healthy and able to participate in the Program activities. I understand that Brenham Flag Football League may request health information concerning my child (children) and/or ask my child (children) to undergo a medical exam. If Brenham Flag Football League determines that my child does have a physical, mental or other condition that may affect his/her

ability to safely and appropriately participate in Program activities (or that may affect the ability of other children to participate safely), the Brenham Flag Football League may determine that my child cannot be permitted to participate. I understand and agree that, while the Brenham Flag Football League desires that all my children will be able to participate, such decisions may have to be made out of concern for the best interests of my child and other participants.

CONSENT TO MEDICAL TREATMENT

In the event my child is injured or becomes ill in Brenham Flag Football League activities, and if I, the parent or guardian of the above-named child, am not present to make medical decisions, I hereby authorize Brenham Flag Football League, its staff, volunteers including volunteer parent participants, coaches, assistant coaches, and referees, supervisors and drivers, to arrange for and consent on my behalf to emergency medical and dental care and treatment, including tests and radiological exams, and surgery, and hospital care and treatment, and to consent to medications for pain and other conditions as prescribed by medical personnel

attending my child. I am responsible for payment of any medical charges or expenses not covered by my insurance or the insurance applicable to my child (if any). My signature below indicates that all information provided in this form is true and accurate, and that I fully agree to all statements made on the form, including but not limited to the Authorization and Release of Liability, Medical Conditions, and Consent to Medical Treatment. My signature also indicates that all legal guardians are aware and consensual with the participation of the above-named child.

Date:	
Parent/Guardian Signature:	
Printed Name:	