

## **SJIYFA - 2020 PLAYER'S AGREEMENT**

I, the undersigned, wishing to play in the league (the "League") of the South Jersey Independent Youth Football Association (the "Association"). Agree as follows.

1. I will play with the **PROGRAM NAME** in the SJIYFA, and not with any other Football Organization/League during the **2020** season.
2. I agree to take proper care of and return and replace all team, League and Association property and equipment given to me or placed in my custody upon the earlier of (i) request by the Association, (ii) my ceasing to play with my club, or (iii) the end of the current season.
3. I have read and understand the Association regulations, and agree to be governed by them and by the Constitution and By-Laws of the Association.
4. I understand that playing football involves risk of personal injury or damage or loss of my personal property and I expressly release the League, Association, all team sponsors, their respective employees and all agents, all officials, coaches, assistants, other players and persons connected with the Association (the "Association Parties" ), from any and all liability associated with such risks.
5. I will refrain from using offensive language which includes taunting any individual's race, color or creed. I will demonstrate leadership by not bullying or alienating any teammates or opponents.

**DATE:** \_\_\_\_\_

\_\_\_\_\_  
**Player's Signature**

\_\_\_\_\_  
**Print Name**

## **PARENT'S CONSENT**

I, the undersigned, do hereby certify that I am the parent or legal guardian of the Player who has signed the above (the "Player"), and hereby consent to the Player's participation in the Association's football program and approve the Player's entering into the foregoing Player's Agreement.

I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child or I could be exposed, infected, or re-infected by COVID-19 by participating in football, and that such exposure or infection may result in severe illness, permanent disability, or death. I understand these risks and willingly choose to accept them. I also understand and acknowledge that I shall not send my child if they are experiencing any symptoms associated with COVID-19, including but not limited to fever, sore throat, shortness of breath, chills, muscle pain, new loss of taste or smell, gastrointestinal symptoms (like nausea, vomiting, or diarrhea), and cough.

I also agree, for myself and in my capacity as parent or legal guardian of the Player, to be bound by all of the terms of the Player's agreement. In addition for myself and on behalf of I hereby release the Association Parties from any and all liability for any personal harm or injury, or any damage to or loss of property sustained by the Player of myself in connection with the Player's participation in any league or association activities.

If the player is in Junior High, I further certify that I understand the Association's eligibility rules for the Junior High Program and that by signing below grant the Association access to school records to verify Player's eligibility.

I have read this Acknowledgment carefully and understand it.

**DATE:** \_\_\_\_\_

\_\_\_\_\_  
**Parent or Legal Guardian's Signature**

\_\_\_\_\_  
**Print Name**