



**INFORMED CONSENT/GENERAL & MEDICAL RELEASE  
YOUTH SPORTS PARTICIPANTS**

*This is a release of liability. Please read carefully before signing.*

Since participation in youth sports activities can be dangerous, the Florida Spring Youth Football League (hereinafter "FSYFL") requires all participants (and their adult parent(s) or guardians) to assume all risks associated with the FSYFL youth football league by signing this general liability and medical release.

For and in consideration of my child being permitted to participate in the FSYFL football tournament activities, I hereby voluntarily release, discharge, waive and relinquish any and all claims or actions for damages for personal injury, permanent disability, death, or property damage which I or my child may have, or which may hereafter accrue to me or my child, as a result of my participation in the FSYFL Football tournament activities or while I am at the facility while others play or for any other reason. This release is intended to discharge, in advance, FSYFL, its officers, employees and agents, and the owners and maintainers of any facility used for the activities, from any and all liability arising out of or connected in any way with my child's participation in practice, pre game, or game tournament activities, even though that liability may arise out of negligence or carelessness on the part of FSYFL, its officers, agents or employees.

I further understand that serious accidents occasionally occur during football youth sports activities, and that participants occasionally sustain serious personal injuries, death or property damage as a consequence thereof. Knowing the risks, I have voluntarily applied for my child to participate in the FSYFL activities and thereby agree to assume those risks to release and hold harmless FSYFL, its officers, agents or employees. I further understand and agree that this release, discharge, waiver, and assumption of risk is to be binding on my and my child's heirs, executors, administrators and assigns.

I further agree to indemnify and to hold harmless the FSYFL, its officers, agents or employees for any loss, liability, damage, cost or expense which they may incur as a result of any injury or property damage I or my child may sustain while participating in the activity.

I agree to comply with the program's stated and customary terms and conditions for participation according to the FSYFL. If I observe any significant changes with regard to my child's readiness for participation in the program, I will remove my child from the program immediately.

**I have read this Informed Consent/General Release, fully understand its terms, that I give up substantial rights by signing it, and sign it voluntarily.**

**Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_**

**Address \_\_\_\_\_ City \_\_\_\_\_**

**This document is a release of liability which affects the rights of your child. Please read the document carefully before signing.**

***I have read this Informed Consent/General Release and I understand the seriousness of the risks and accept them as a participant. (To be signed by all players who are league age 12 and older)***

**Name of Participant \_\_\_\_\_ Date of Birth \_\_\_\_\_**

**Participants Signature \_\_\_\_\_ Date Signed \_\_\_\_\_**