

Youth Sports Consent and Waiver

Event/Program: _____

Participant Name: _____

Date of Birth: _____

Consent to Participate

I, the undersigned parent/legal guardian, hereby give permission for my child to participate in the above-named youth sports event or program. I understand that participation in sports activities carries inherent risks of injury, even when safety procedures are followed.

Waiver and Release of Liability

In consideration of my child being allowed to participate, I hereby release, discharge, and hold harmless the organizers, coaches, volunteers, sponsors, and affiliates from any and all liability, claims, demands, losses, or damages arising out of or related to any injury, illness, or accident involving my child during participation.

Emergency Authorization

In the event of an emergency, I authorize the supervising volunteers, staff, or medical personnel to secure medical treatment for my child as deemed necessary. I understand that every reasonable effort will be made to contact me.

Medical Information

Please list any allergies, medical conditions, or medications:

Photography Release (Optional)

I consent / do not consent to the use of photographs or videos of my child for promotional purposes by the organizers.

Parent/Guardian Name (Print):

Signature:

Date:
