WESLEY CHAPEL BULLS
2012 PARTICIPANT REGISTRATION

CONSENT AND WAVIER OF LIABILITY

In consideration of being allowed to participate in this Program, I hereby RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE the Pasco Police Athletic League. (PPAL), Wesley Chapel Tackle Football & Cheer, Inc. (Bulls), and their board members, officers, coaches, servants, agents, employees or volunteers (hereinafter referred to as RELEASEE) from any and all liability, claims, demands, or course of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by my child, or to any property belonging to my child, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEE, or otherwise, while participating in this Program, or while in, on or upon the premises where the Practices or Games are being conducted.

To the best of my knowledge, my child is in good physical condition and I am not aware of any physical infirmity which would place my child at risk to participate in any way with the Program's activities. I am fully aware of the risks and hazards connected with my child's participation in this Program. I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISK OF LOSS, PROPERTY DAMAGE OR PERSONAL INJURY, INCLUDING DEATH, that may be sustained by me/my child, or any loss or damage to property owned by my child, as a result of being engaged in the Program's activities, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEE or otherwise. I further hereby AGREE TO INDEMNIFY AND HOLD HARMLESS, the RELEASEE, from any loss, liability, damage or cost, including court costs and attorneys' fees, that may accrue related to my child's participation in the Program, WHETHER CAUSED BY NEGLIGENCE OF RELEASEE or otherwise.

During the period of the Program, which includes practices, games, and competitions, I hereby give permission for the staff of this Program to administer appropriate medical attention to my child in the event of any accident, illness, or injury. Furthermore, I present that any medication to which aforesaid child is allergic or currently taking is listed above and that minor child is responsible for consuming the prescribed dosage. I will be responsible for any and all costs of medical coverage and treatment provided not covered by insurance.

It is my express intent that this Waiver of Liability and Hold Harmless Agreement consent to Medical Treatment shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representative, if I am deceased, and shall be deemed as a RELEASE, WAIVER, this Waiver of Liability and Hold Harmless Agreement/Consent to Medical Treatment shall be construed in accordance with the laws of the State of Florida. In signing this release, I acknowledge and represent that I have read and understand it and sign in voluntarily; I am at least eighteen (18) years of age and fully competent; and I execute this Release for full, adequate and complete considerations fully intending to be bound by same.

I HAVE READ THIS CONSENT AND WAIVER OF LIABILITY AND FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

_____ _____

Parent/Guardian **Signature** **Date**

_____
Participant Name

_____
Division

MEDIA RELEASE

I, as the Parent/Guardian of said above child authorize the Wesley Chapel Bulls and/or PPAL to photograph me and or my child/children for the purpose of making scrapbooks, display boards, newsletters, website, yearbooks and/or newspaper articles, and any other media related directly to the Program. These photographs include any taken in the year 2011.

This consent will not serve as a release of any confidential information to other sources. My approval or disapproval of this consent will not have any adverse effect on the treatment of me or my children by the Wesley Chapel Bulls and/or PPAL. I have given my consent freely, voluntarily and without coercion. I understand that I may revoke this authorization at any time providing I notify The Wesley Chapel Bulls Director in writing. However, such revocation will have no effect on any action previously taken.

EQUIPMENT AGREEMENT

I, as the Parent/Guardian of said above child, hereby understands that I am responsible all equipment listed on the Equipment Distribution list issued to my child and same is considered rented to me by the Wesley Chapel Tackle Football & Cheer organization until the end of the current football/cheerleading season. The items are in no way to be changed or altered, with the exception of normal wear and tear, without the consent of the Athletic Director or Director, at which time must be done professionally.

If the items are lost, stolen, or altered without prior consent, I will be responsible for the replacement cost as outlined in Equipment/Uniform Issue & Return Form, which will be payable to the Wesley Chapel Tackle Football & Cheer organization by cash, check, or money order, plus any fees, including legal and filing fees, associated with the Wesley Chapel Bulls attempting to collect this debt.

Failure to return rental property or equipment upon expiration of the rental period and failure to pay all amounts due including costs for damages to the property and equipment are Prima Facie evidence of intent to defraud punishable in accordance with Section 812.155 FLA Statutes.

I HAVE READ THIS MEDIA RELEASE AND EQUIPMENT AGREEMENT AND FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

_____ _____
Parent/Guardian **Signature** **Date**