

# HYSA

## 2020 Volleyball Registration

Age Group	HVY Use Only Payment Method
___ 1 <sup>st</sup> /2 <sup>nd</sup>	___ Cash
___ 3 <sup>rd</sup> /4 <sup>th</sup>	___ Check # _____
___ 5 <sup>th</sup> /6 <sup>th</sup>	___ Square/PayPal
	\$ _____

Player Full Name: \_\_\_\_\_

Name Player goes by or nick name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Grade \_\_\_\_\_ Names & Grades of siblings playing: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent's (Guardian's) Name: \_\_\_\_\_

Relationship to player: \_\_\_\_\_

Phone No: (CELL): \_\_\_\_\_

Email: \_\_\_\_\_

Secondary Parent's (Guardian's) Name: \_\_\_\_\_

Relationship to player: \_\_\_\_\_

Phone No: (CELL): \_\_\_\_\_

Email: \_\_\_\_\_

Jersey Size (Circle) : YS YM YL AS AM AL AXL AXXL

Choose your own jersey # (\$10)  Yes #: \_\_\_\_\_  No, thanks

Medical conditions, health concerns, or concerns that affect the child:  
\_\_\_\_\_

I am willing to volunteer for the following:  Coach  Assistant Coach  Concessions  
 Sponsorship  Other (list on back)

### Parent's (Guardian's) Agreement and Authorization:

By my signature below, I confirm that the above is true to the best of my knowledge. Furthermore, I agree to encourage my child to use good sportsmanship and I agree to show good sportsmanlike conduct as a fan or volunteer. I also give permission to the HYSA to give the above phone numbers to coaches, assistant coaches, players, and parents of players. Finally, by my signature below, I confirm that my child has permission to play in the above sport, and I also confirm that I am the parent, guardian, or managing conservator with the authority to authorize the child's participation in the above sport. In case of emergency, I hereby authorize a representative of the Howe Youth Sports Association to seek medical attention for my child.

Parent's (Guardian's) signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Player's Agreement:

I agree to be loyal to my team and coaches, to be present at practice sessions and games, and to obey all rules. I will always do my best and be a good sport whether or not I am in the game.

Player's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Website Release / Facebook:

I give authorization for the HYSA or a representative to post pictures of my child's participating on association's website or Facebook page.

Parent's (Guardian's) signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Amateur Athletic Minor Waiver and Release of Liability**

Please Read Before Signing

In consideration of being allowed to participate in any way in Howe Youth Sports Association athletic/sports programs and related events and activities, the undersigned:

1. Agrees that the parent(s) and/or legal guardian(s) will instruct the minor participant that prior to participating, he or she should inspect the facilities and equipment to be used, and if the participant believes anything is unsafe, he or she should immediately advise his or her coach or supervisor of such conditions and refuse to participate.
2. I willingly agree to comply with the program's stated and customary terms and conditions for participation. If I observe any unusual significant concerns in my child's readiness for participation and/or in the program itself, I will remove my child from participation and bring such to the attention of the nearest official immediately; and,
3. I, for myself, spouse, and child ACKNOWLEDGE AND FULLY UNDERSTAND that each participant will be engaging in ACTIVITIES THAT INVOLVE RISK OF INJURY, INCLUDING PERMANENT DISABILITY AND DEATH, and severe social and economic losses which might result not only from his or her own actions, inactions, or negligence, but the actions, inactions, or negligence of others; the rules of play; or the condition of the premises or of any equipment used. Further, that there may be risks not known to us or not reasonably foreseeable at this time.
4. I, for myself, spouse, and child ASSUME ALL THE FOREGOING RISK AND ACCEPT PERSONAL RESPONSIBILITY FOR THE DAMAGES following such injury, permanent disability, or death.
5. I, for myself, spouse, and child RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO SUE Howe Youth Sports Association, Inc., its affiliated clubs and associations, or and their respective administrators, directors, officers, coaches, and other employees of these organizations, other participants, sponsoring agencies, sponsors, advertisers, hereinafter referred as "releasees", from any and all liability to each of the undersigned, his or her heirs, and next of kin for any and all CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON ACCOUNT OF INJURY, INCLUDING DEATH OR DAMAGE TO PROPERTY, CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.
6. I, for myself, spouse, and child, and on behalf of my/our heirs, assigns, personal representatives, and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all of the above releases from any and all liabilities incident to my involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.
7. I, for myself, spouse, and child, and on behalf of my/our heirs, assigns, personal representatives, and next of kin, HEREBY AGREE to resolve any disputes with athletes, coaches, managers, league officials, administrators, directors, officers, volunteers, participants of the Howe Youth Sports Association, Inc., and their heirs, successors, and assigns, that cannot first be resolved through the procedures of the Howe Youth Sports Association, Inc., or any league or sports association that the participant is participating in, through mediation.

I/WE HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT WE HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT VOLUNTARILY.

\_\_\_\_\_  
Parent or Guardian Signature & Relationship

\_\_\_\_\_  
Date