

NEBRASKA MIDGET FOOTBALL LEAGUE

Parent or Guardian Consent Form

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I THE PARENT OR GUARDIAN OF THE BELOW NAMED CANDIDATE FOR THE NEBRASKA MIDGET FOOTBALL LEAGUE, HEREBY GIVE APPROVAL FOR HIS OR HER PARTICIPATION IN ANY AND ALL TEAM OR LEAGUE ACTIVITIES DURING THE CURRENT SEASON. I ASSUME ALL RISKS AND HAZARDS INCIDENTAL TO SUCH PARTICIPATION. INCLUDING TRANSPORTATION TO AND FROM ACTIVITIES; AND TO WAVE, RELEASE, ABSOLVE, INDEMIFY AND AGREE TO HOLD HARMLESS THE NEBRASKA MIDGET FOOTBALL LEAGUE, THE ORGANIZERS, SPONSORS, COMMISSIONERS, ORGANIZATIONS, COACHES AND PERSONS TRANSPORTING THE CANDIDATE TO AND FROM ACTIVITIES FOR ANY CLAIM (S) ARISING FROM ANY INJURY TO THE CANDIDATE.

I GRANT PERMISSION TO THE TEAM OR LEAGUE OFFICIALS OF THE NEBRASKA MIDGET FOOTBALL LEAGUE TO AUTHORIZE AND OBTAIN MEDICAL CARE FROM ANY LICENSED PHYSICIAN, HOSPITAL OR MEDICAL CARE CLINIC SHOULD THE CANDIDATE BECOME ILL OR INJURED WHILE PARTICIPATING IN TEAM OR LEAGUE ACTIVITIES.

I HAVE BEEN INFORMED BY MY ORGANIZATION ABOUT LB260 CONCUSSION AWARENESS ACT AND SIGNED THE PARENT/ ATHLETE CONCUSSION INFORMATION SHEET.

PLAYERS JERSEY NUMBER

PRINT PLAYERS FULL NAME ON THIS LINE

AGE AS OF AUGUST 1ST

SIGNATURE OF PARENT OR GUARDIAN

DATE

SIGNATURE OF PLAYER

DATE

TO ALL COACHES: THIS SHEET MUST BE FILLED OUT WITH A PICTURE AFFIXED AND TURNED IN WITH A COPY OF PLAYERS BIRTH CERTIFICATE AND YOUR ENTRY FEES. TO THE LEAGUE OFFICIALS AT WEIGH IN TIME ALONG WITH YOUR OFFICIAL TEAM ROSTER. THESE SHEETS MUST BE IN THE SAME ORDER AS THE PLAYERS ARE LISTED ON THE ROSTER.