

## Troy Titan Football Club Parental Waiver & Consent Form

As the parent of legal guardian of the child named below, I hereby give my full consent and approval for my child to participate as a team member in the program designated above.

I recognize and acknowledge that there are certain risks of physical injury to participants in the above mentioned program, and I agree to assume the full risk of any injury, including death, damage, or loss regardless of severity, which my child may sustain as a result of participating in any and all activities connected with the program.

I hereby certify that my child is fully capable of participating in the above program, and that my child is healthy, with no physical or mental disabilities or infirmities that would restrict full participation in these activities, except as listed below.

I fully agree to indemnify and hold harmless the Tri-Township Park District, the Troy Titan Football Club, Triad School District and its officers, agents, servants, and employees from any and all claims resulting from injuries, including death, damages and losses sustained by my child arising out of, or connected with, or in any way associated with the activities of the program.

Name of Child:	Age:	D.O.B.	
Address:	City:	State:	Zip Code:
Physical Limitations:			
Parent Signature:		Date:	

### Additional Emergency Medical Information

Emergency Telephone:	Preferred Hospital:
Preferred Doctor:	Doctor's Telephone: