

Creeks Athletic Association (CAA)

NW St Johns County • 1721 Racetrack Road • St Johns, FL 32259



Consent and Release from Liability

Parental/Guardian Consent, Acknowledgement and Release

- A. I hereby give consent for my child/ward to participate in any CAA recognized or sanctioned sport. I agree to follow the rules of the CAA sports leagues and to abide by their decisions and policies. I know that my child's/ward's athletic participation is a privilege.
- B. I know of, and acknowledge that my child/ward knows of, the risks involved in athletic participation. I understand that serious injury, including the potential for a concussion, and even death, is possible in such participation, and choose to accept such risks. I voluntarily accept any and all responsibility for his/her safety and welfare while participating in CAA athletics, with full understanding of the risks involved.
- C. With full understanding of the risks involved, I hereby release and hold harmless CAA, the sports associations against which it competes, the county recreation and parks facilities and personnel, the contest officials, the coaches, and the league's volunteer staff of any and all responsibility and liability for any injury or claim resulting from such athletic participation and agree to take no legal action against any of the aforementioned because of any accident or mishap involving athletic participation or exhibition.
- D. I authorize emergency medical treatment for my child/ward should the need arise for such treatment while my child/ward is under the supervision of any CAA coach or volunteer staff. I hereby authorize the use or disclosure of individually identifiable health information should treatment for illness or injury become necessary.
- E. I consent to the disclosure, upon CAA's request, and hereby grant to CAA the right to review all records relevant to my child's/ward's athletic eligibility including, but not limited to, his/her records relating to enrollment and school attendance, age, discipline, finances, residence and physical fitness.
- F. I hereby grant the released parties the right to photograph and/or videotape my child/ward and further to use said child's/ward's name, face, likeness, voice and appearance in connection with exhibitions, publicity, advertising, promotional and commercial materials without reservation or limitation. The released parties, however, are under no obligation to exercise said rights herein.
- G. I understand that the authorizations and rights granted herein are voluntary and that I may revoke any or all of them at any time by submitting said revocation in writing to CAA. By doing so, however, I understand that my child will no longer be eligible for participation in CAA athletics.

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BY COMPLETING YOUR CHILD'S REGISTRATION, YOU ARE AGREEING THAT YOU HAVE READ AND ACCEPTED THIS CONSENT AND RELEASE FORM AND AUTHORIZE YOUR MINOR CHILD/WARD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF CAA SPORST LEAGUES, THE SPORTS ASSOCIATIONS AGAINST WHICH IT COMPETES, THE COUNTY RECREATION AND PARKS FACILITIES AND PERSONNEL, THE CONTEST OFFICIALS, THE COACHES, AND THE LEAGUE'S VOLUNTEER STAFF USE REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY AGREEING TO THE TERMS OF THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM CAA, THE SPORTS ASSOCIATIONS AGAINST WHICH IT COMPETES, THE COUNTY RECREATION AND PARKS FACILITIES AND PERSONNEL, THE CONTEST OFFICIALS, THE COACHES, AND THE LEAGUE'S VOLUNTEER STAFF IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND CAA HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.