

-Release

The Undersigned ("participant") has requested to participate in Coach Mo SportsGroup activities (football, basketball, track & field, Speedcamp, football camps, and related/other activities). On this Date _____ and any subsequent dates. The participant voluntarily desires to participate in Coach Mo SportsGroup activities and hereby agrees to release Coach Mo SportsGroup or the above-mentioned school from any liability, loss or damage the participant may incur as a result of participation in the activity. I also understand that there are absolutely no refunds.

Acknowledgement of the assumption of risk:

Participant is not a minor (or, if a minor, this release is signed on the participant's behalf by a parent or legal guardian) and is voluntarily participating in the Arizona events with full knowledge of the inherent risks, potential hazards and possible consequences of such participation. Participation hereby expressly releases the host school, staff, officers, contractors and invitees (collectively referred to as the school) from any cause whatsoever related to Coach Mo SportsGroup. Participation in the activity or the actions or inaction's of participant or other participants at or in connection to Coach Mo SportsGroup activities, including, without limitation, any such injury, loss or damage caused in whole or in part by any act or omission by the host party, team, organization, municipality (host city/state/town), school or school district, whether in connection with the host facilities/organization's involvement in scheduling or coordinating the activity, its ownership or control of any real or personal property used in connection with the activity, if applicable, or otherwise. We understand that as the club has several entries every event that at times a mistake may be made. If it happens, we will address the coach and if changes can be made or we will correct it next time. We also understand that Coach Mo is the Head Coach and can change practice sites & times to suit the needs of the team during certain phases. I also understand that as a coach & official, Coach Mo and his staff must also "work" the meets/games and are not available to events during events. We also understand that team positions are not definite. Athletes can be added or removed at any point. I/We understand that proper sportsmanship, proper etiquette & behavior are to be exercised at all times by parents & athletes. I/We will contact the head coach to address any problems that may arise before or after practice or games if possible. I/We have read & understand and am in agreement with the set policies listed above. The signatures below confirm that both parent (s) & athlete (s) will abide by rules & guidelines set forth herein in and confirm that both parent (s) & athlete (s) will abide by rules & guidelines set forth herein.

Medical Information-Circle one Y=yes/N=

Asthma Y N Allergies Y N Glasses/Contacts Y N Serious Illness Y N
Sickle Cell Y N Heart Murmur Y N Kidney Disease Y N Seizures {Fits} Y N
Diabetes Y N Bleeding tendencies Y N Fractures last year? Y N
Repeated Bone/Joint injury Y N Surgery in the past Year Y N

Current Medication (s)

By signing, I/We understand and agree to all the policies above and that my or my child's participation is at my own risk and that neither Coach Mo SportsGroup, the Lightning Track Club, the host, host school/park, or any training site the Lightning uses, coaches, the National Football League (NFL-it's players, employees, volunteers and alumni), the Arizona Cardinals (it's players, employees, volunteers and alumni) other volunteers or athletes will be held liable for any injuries that occur. I/We also give my permission for any emergency treatment necessary either in practice or competition. I/We authorize any hospital and or physician to perform treatments from any injuries resulting from any Coach Mo SportsGroup functions including travel to and from said functions.

Athlete's Name/Age

Athlete's Name/Age

Athlete's Name/Age

Athlete's Name/Age

Parent's Printed Name

Parent's Signature/Date

Cell Phone Number

Home Phone Number

Email Address

Please Make Checks Payable to Coach Mo SportsGroup