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Fort Saskatchewan Sting Football Club

Player Consent 2017

All of the following must be completed prior to players receiving equipment, or participating in practises.

- Player & Parent Information Form
- Contact Sports: Consent Form and Agreement to Participate
- Interview, Photograph, and/or Video Consent Form
- Metro Edmonton League Form
- Field Trip Permission Form
- Equipment Deposit (**\$450 Dated by November 30th**)
Cheque Number _____
- Spring Camp Fees (**\$50**)
 - ___ Cash
 - ___ Cheque
 - Cheque Number _____
- Regular Season Fees (**\$525**)
 - ___ Cash
 - ___ Cheque
 - Cheque Number _____
- Refundable volunteer fee (**\$200 Dated November 30th**)
Cheque Number _____

**** Cheques payable to Fort Sting Football**

By signing below, I am confirming that the information on the forms is true to the best of my knowledge and that I understand this information will be kept on file for use throughout the 2017 season. If changes need to be made during the season it is my responsibility to contact the registrar.

Player signature _____

Parent/Guardian signature _____

Date _____

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Player Information Form

Name _____ Date of Birth () _____

Grade in September 2017 _____

Address _____ P Code _____

Home Phone _____ Cell phone _____ Email
Address _____

- Practice Jersey Size _____
- Practice Pant Size _____
- Preferred Position _____

Are you taking any medication? If so please list below.

Are you taking any supplements? If so please list below.

Do you have any allergies? (ie: medication, food, stings) If so please list below.

Do you have a history of neck/head injuries (ie: concussions)? If so please specify.

Do you have any medication condition? If so please list below.

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Parent Information

Mother

Name _____

Address _____ P Code _____

Home Phone _____ Cell phone _____ Email
Address _____

Father

Name _____

Address _____ P Code _____

Home Phone _____ Cell phone _____ Email
Address _____

As indicated by my signature below, I hereby freely and voluntarily consent to have this information accessible as required.

Signature of Parent/ Guardian

DATE

I further acknowledge that I understand, appreciate and accept the inherent physical risks involved in participating in any football activities. By signing I assume the risk and release the releases the Fort Saskatchewan Sting Football Club of any liability.

Signature of Parent/ Guardian

DATE

Signature of Player

DATE

CONTACT SPORTS - Parent/Guardian Consent Form

1. Elements of Risk and the Responsibilities of the Student-Athlete

Contact sports have physical demands and certain inherent risks which may be beyond the control of the school, school board and the organizers of the sport. Tackling, checking and blocking by their nature result in collisions between two or more players that can involve a great deal of force.

Students who participate in contact sports must accept that there is the possibility of serious injury as a result of their participation. Accidents can result from the nature of this activity and can occur without any fault on the part of the participants, the School Board, the employees or agents of the board, or the facility where the activity takes place. By choosing to participate in a contact sport, you are assuming the risk of an accident occurring. The chance of an accident occurring can be reduced by carefully following instructions at all times while engaged in this activity. Each student-athlete should also attempt to offset the risks of contact sports by:

1.1 Physical Readiness

- Physical preparation through regular exercise particularly in the three months prior to the start of the season
- Athletes should strive for overall conditioning with particular attention to strength and flexibility in the neck, shoulder and knee areas

1.2 Equipment Readiness

- Ensure that any personal equipment used is appropriate and in a good state of repair
- Notify the coaching staff of any problems with equipment issued by the team and see that this equipment is returned promptly and in good condition
- Always wear an intra-oral dental guard when playing contact sports

1.3 Technical Readiness

- Learn and practice the skills and techniques of the activity, particularly regarding proper tackling, checking techniques
- Always warm-up properly before every practice and game
- Attend team practices regularly

1.4 Safety Awareness

- Always attempt to participate with safety in mind as much as possible given the dynamic nature of the activity
- Never butt, ram or spear an opponent
- Never use performance enhancing drugs

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2. Acknowledgement

We have read and understand the Elements of Risks and insurance information stated above. We have also read and understand the Responsibilities and have attempted to see that they have all been fulfilled.

Signature of Student

Date

Signature of Parent/Guardian

Date

3. Permission

3.1 I give my son/daughter _____ permission to participate in a contact sport.

Signature of Parent/Guardian

Date

AND

3.2 If the student is 18 years of age or over, also complete this section. I agree to participate in the contact sport and abide by all measures to make this program as safe as possible.

Signature of Student

Date

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CONTACT SPORTS -CONSENT FORM AND AGREEMENT TO PARTICIPATE

Print Name of Participant: _____

1 CONDUCT

I hereby understand, agree to abide by and support the rules of play, personal conduct, and terms of conditions for participation.

2 RISK OF SERIOUS INJURY

I understand and appreciate that the risk of injury from contact sports is significant, including the potential for permanent paralysis and death and, while particular rules, equipment and personal discipline may reduce this risk, the risk of serious injury does exist. By my child's participating, I KNOWINGLY ASSUME ALL SUCH RISKS, both known and unknown.

3 AUTHORIZATION FOR SERVICES

I hereby give consent for EIPS personnel to provide my participating child with emergency medical care as warranted and associated with participation on a member team during sanctioned events.

SIGNATURE(S)

I understand and agree to respect all these conditions of participation in contact sport programs.

Participant Signature

Date

Parent/Guardian Name (print)

Date

Parent/Guardian Signature

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Interview/Photo/Video Consent Form

This information is collected and distributed in accordance with the *Freedom of Information and Protection of Privacy Act*, Sections 33, 34, 38, 39, 40, and 41.

Interviews, photographs, video and tape recording in relation to Sting Football 2016.

I _____ hereby provide consent for _____
Parent/ Guardian Student Name

To be Interviewed, photographed, videotaped and tape recorded in relation to Sting Football 2016.

I/we have given this consent voluntarily.

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METRO EDMONTON HIGH SCHOOL ATHLETIC ASSOCIATION

10425 – 84 Avenue, Edmonton, AB, T6E 2H3

Phone: (780) 989 - 3005 Fax: (780) 437 - 7480

Email: metroedm@telus.net

ACKNOWLEDGMENT AND AGREEMENT (Student /Guardian)

WHEREAS the Alberta Schools' Athletic Association ("ASAA") is a voluntary, non-profit organization that has been established to coordinate a program of worthwhile athletic activities for the young people of Alberta in an educational setting;

AND WHEREAS Fort Saskatchewan High School is one of more than 370 member high schools which together ultimately determine the policy of the ASAA through representation on the Board of Governors of the ASAA;

AND WHEREAS Fort Saskatchewan High School is also a member of Metro Edmonton High School Athletic Association ("MEHSAA") which also has Bylaws, Rules and Policies which govern the participation of Fort Saskatchewan High School in athletic activities

AND WHEREAS it is not in the best interests of any of the student athletes who are served by the work of the ASAA and MEHSAA for them to spend resources responding to court applications brought by individual student athletes, their parents or guardians;

We, [Student and guardian], acknowledge and agree as follows:

1. We have had an opportunity to review the Bylaws and Polices of the ASAA and MEHSAA which are available for our review at:
-- <http://www.asaa.ca>
-- <http://www.telusplanet.net/public/metroedm>
2. We will accept the outcome of any appeal process available through the ASAA or MEHSAA regarding any matter concerning me or any other athlete registered as a student at Fort Saskatchewan High School as final and binding on us.
3. We acknowledge that any application for a review of an outcome of an appeal process of the ASAA or MEHSAA by a Judge in a court of law must be brought by the administration of Fort Saskatchewan High School and not by us.
4. Fort Saskatchewan High School's Membership in the ASAA and MEHSAA is a privilege and not a right.
5. We, authorize Fort Saskatchewan High School to provide a copy of this document to the ASAA and MEHSAA to use or publish in any manner they see fit.

Student Name (print)

Student Signature

Date

Guardian Name (print)

Guardian Signature

Date