

## Consent and Conduct Form

Player Name(s): \_\_\_\_\_

### CONSENT

I (We), in consideration of my son/daughter's participation in the Wilson Youth Football program, hereby consent to the best available emergency medical treatment or hospitalization necessary for the welfare of my child. In the event of injury or illness in which my child is participating as a member of one of the Wilson Youth Football or cheerleading teams, authorization is in effect and the Wilson Youth Football Parents Association is directed to act upon such authorization immediately regardless of parental attendance. I(We) also acknowledge that all information given on the Registration Form is accurate and true, to the best of my(our) knowledge.

### EQUIPMENT

I(We) agree to return the equipment issued to my(our) son/daughter at the end of the season. Additionally, the equipment needs to be in a condition as good as when received, except for normal wear-and-tear. If equipment is NOT returned for any reason, or is returned with excess damage and/or wear-and-tear, Wilson Youth Football will result in a charge of \$150.

### CONDUCT

I understand that, by registering my child, I become a member of the Wilson Youth Football Parents Association, and am therefore governed by the constitution and bylaws of that organization. I understand that I have signed a Parent Code of Conduct, and that it is my duty as a parent to adhere to that Code. I understand that any personal misconduct, including inappropriate social media posts, **might result in my expulsion from this league, as per Article VIII of the Wilson Youth Football Parents' Association Constitution.**

### MEDIA CONSENT

I hereby consent that interviews, photographs, and/or recordings of my child may be taken or used by the Association only for public relations, educational or other purposes consistent with the purpose and mission of the Wilson Youth Football Parents' Association, including but not limited to the WYF website, Twitter, and Facebook pages.

### MEDICAL RESPONSIBILITY-Parents

You, the parents/guardians, are responsible for informing Wilson Youth Football coaches if your son/daughter is not allowed to participate, as prescribed by a doctor. WYF is not liable if we are not made aware that a player has not been cleared to play by a doctor.

X  
\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date