

Middle School Indoor Track - Age 5 - 8th Grade
REGISTRATION FORM DANBURY YOUTH TRACK AND FIELD ASSOCIATION
2015-2016 PARTICIPANT CONTRACT AND PARENTAL CONSENT FORM

Registration Fees: New Athletes: (before 3/13/16) \$ 139.00 / (after 3/13/16) \$149.00 (includes uniforms)
 Returning Athletes \$89.00 (does not include uniforms).
 Returned Check fee \$25- (must be paid in cash)*

DYTFA-c/o Irving Fox
58 Wedgewood Drive, Danbury, CT 06811
ghwill@earthlink.net or 914-396-7473
(Checks payable to DYTFA)

Legal Name of Participant (MUST match the birth certificate): Male Female

Last Name: _____ First Name: _____ Middle Name: _____

Address: _____ Town: _____ Zip Code: _____

Phone: (Inc Area Code) _____ (DOB) Month Day Year: _____

School: _____ Grade in Fall: _____
Grade Point Average: _____

Mailing Address if different from above:

Name of Legal Parent/Guardian: _____

Relationship to Athlete: _____

Address (if different from above): _____

City: _____ State: _____ Zip
code: _____

Telephone No: _____

Mother's Name: _____ Cell Phone #: _____

Father's Name: _____ Cell Phone:# _____

Email addresses: Mother: _____
 Father: _____

In the event of an emergency please contact following:

First Name: _____ Last Name: _____

Relationship: _____ Cell Phone: _____

Address: _____ Telephone Number: _____

Email Address: _____

PRIMARY CARE PROVIDER INS. CO: _____ POLICY #: _____ IF NO PRIMARY CARE PROVIDER WRITE NONE, PARENT/GUARDIAN IS RESPONSIBLE FOR DEDUCTIBLE.

DYTFA OFFICAL ONLY

Participant Fees: Amount Paid \$ _____ Type of Transaction: _____ Cash _____ Check _____

Birth Certificate _____ Passport _____ Report Card _____ Physical Dr. Form _____

1. PERMISSION TO PARTICIPATE

I, the parent/guardian of the above-named participant hereby acknowledge that my child is in good general health and I give my approval for my child to participate in any and all DYTFA national, regional, league/conference, association and team/squad activities, including transportation to and from the activities by a licensed driver with proof of insurance.

2. INTENT TO INFORM

I acknowledge that I am fully aware of the potential dangers of participation in any sport and I fully understand that participation in track and field may result in **SERIOUS INJURIES, PARALYSIS, PERMANENT DISABILITY AND/OR DEATH**. Furthermore, I fully acknowledge and understand that protective equipment does not prevent all participant injuries, and therefore I do hereby waive, release, absolve, indemnify, and agree to hold harmless the local, league and regional DYTFA and any and all organizers, sponsors, supervisors, participants, and persons transporting the above named participant to and from activities, from any claim arising out of any injury to my/our child whether the result of negligence or for any other cause.

3. EMERGENCY MEDICAL AUTHORIZATION

I hereby grant my permission for any and all emergency medical/dental treatment and/or first aid to be administered to my child/participant, including authorizing any medical treatment facility/hospital to administer emergency treatment, for any illness/injury/accident resulting from participation in any and all DYTFA activities.

4. EQUIPMENT RESPONSIBILITY

I agree to assume full responsibility for any and all equipment/uniforms loaned to the above named participant and I agree to promptly return, upon request, the uniform and other equipment issued to the above named participant in as good condition as when received except for normal wear and tear. If I fail to adhere to this policy, I will be responsible for the replacement cost of such equipment. I agree to furnish an authentic certified copy of a birth certificate of the above-named

participant to local DYTFA officials.

5. INSURANCE DISCLOSURE

I am aware that the DYTFA organization carries group accident insurance which is considered secondary or excess for medical purposes to any and all valid insurance I possess is considered primary insurance. Furthermore, I agree to notify in writing my DYTFA of any medical claim as a result of participation in Track and Field as soon as reasonably possible. I understand that any registration fee paid does not constitute a direct premium for insurance and that a deductible(s) may apply.

6. SCHOLASTIC VERIFICATION

I hereby stipulate that either my child is scholastically fit and will adhere to all rules and regulations therein. Furthermore, I hereby authorize my child's school to release school grades, report card results, and any and all other pertinent scholastic information to DYTFA in order to comply with DYTFA requirements.

7. FINANCIAL RESPONSIBILITY

I hereby stipulate that I have been advised by DYTFA of my rights, if any, to a refund in accordance with the local organization policies, and I have also been advised of my fundraising obligations for the entire season and agree to fully comply with those obligations.

8. ADULT CODE OF CONDUCT:

S1: In order to uphold the goals of DYTFA and ensure that all participants have the benefit of a safe and fun learning environment, all parents, guardians and other adults and attendees of DYTFA events, including but not limited to practices, competitions, and banquets, must behave accordingly in a respectful, courteous and sportsmanlike manner at all times.

S2: Any adult who is using alcohol, tobacco or non-prescription drugs and/or appears intoxicated at a DYTFA event, and/or who is flagrantly rude, attempts to intimidate, verbally abuse, heckles, taunts, ridicules, boos, throws objects and/or uses vulgarity or profane language/gestures with an official, coach, volunteer, staff member, participant or other event attendee, must receive a verbal warning and/or be asked to leave a DYTFA event. The member organization may also provide a written warning to the individual regarding the misbehavior. The adult's children may also be removed from the event. Any adult who commits one of the above stated offenses a second time, will be banned from any and all DYTFA events for a period of one year from the date of the second offense, and their children may also be removed from the program(s) for that time period.

S3: Any adult who physically assaults an official, coach, volunteer, staff member or participant or threatens grave bodily harm may be banned from any and all Pop Warner events for one year from the date of the offense, and their children may also be removed from any and all DYTFA programs for that same period of time. After the ban has expired, if the individual commits another offense of the adult code of conduct, the individual will be permanently banned from any and all DYTFA events and the individual's children may also be permanently removed from any and all DYTFA programs.

10. ADHERENCE TO DYTFA RULES AND PROCEDURES

I hereby understand and acknowledge that as a parent/guardian of a DYTFA participant it is my responsibility to comply with all rules and regulations stipulated, adopted or recognized by DYTFA or any of its member organizations and understand that any non-compliance with any and all rules and regulations may be cause for discipline and/or dismissal of the participant, myself, and/or any spectators or other persons affiliated with the undersigned and the above named participant. I further understand that the participant must meet DYTFA age requirements on their official certification date as established by DYTFA without exception. I agree to furnish an authentic certified copy of a birth certificate of the above-named participant to DYTFA officials and understand that valid proof of age, a current year's signed medical release ,participant contract and parental consent, and scholastic fitness forms must be presented by date of certification in order to participate further in DYTFA activities.

11. DISPUTE RESOLUTION POLICY

I hereby understand and acknowledge that all civil disputes between DYTFA and any and all affiliated parties will be subject to binding arbitration in the locale Danbury, CT in accordance with Connecticut law under the guidelines and rules of the American Arbitration Association. I hereby agree that this binding arbitration shall be in lieu of any litigation by and between myself, DYTFA and any and all affiliated parties. I also understand and agree that if I contest any decision or ruling of DYTFA and seek other recourse, that I will reimburse DYTFA for all legal fees and expenses it reasonably incurs. If any portion of this form shall be deemed unenforceable or invalid, the reminder shall remain in full force and effect. By my signature below, I hereby stipulate that I have read, fully understand and voluntarily agree to all of the above:

Signature of Parent/Guardian _____
Print Full Legal Name _____
Signature of Participant _____
Print Full Legal Name _____
Date _____

DYTFA is a Non-Profit organization run by dedicated volunteers. We are always looking for help. Please select areas where you would be interested in volunteering:
Coach _____ Team Parent _____ Fundraising _____