



San Joaquin Valley Youth Football League

WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19

ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT

In consideration of being allowed to participate on behalf of San Joaquin Valley Youth Football League athletic program and related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe and any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS (insert name of sports organization) their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releases and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releases for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

Name of parent/guardian: _____ Parent
guardian/signature: _____ Date signed: _____

**** REVISED 2/2025 - DOCUMENT WILL BE KEPT ON FILE & WILL BE VALID FROM ONE YEAR FROM DATE SIGNED****



CONCUSSION FACT SHEET FOR PARENTS

WHAT IS A CONCUSSION?

A concussion is a type of traumatic brain injury. Concussions are caused by a bump or blow to the head. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious. You can’t see a concussion. Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days or weeks after the injury. If your child reports any symptoms of concussion, or if you notice the symptoms yourself, seek medical attention right away.

WHAT ARE THE SIGNS AND SYMPTOMS OF CONCUSSION?

If your child has experienced a bump or blow to the head during a game or practice, look for any of the following signs of a concussion:

SYMPTOMS REPORTED BY ATHLETE:

• Headache or “pressure” in head • Nausea or vomiting • Balance problems or dizziness • Double or blurry vision • Sensitivity to light • Sensitivity to noise • Feeling sluggish, hazy, foggy, or groggy • Concentration or memory problems • Confusion • Just not “feeling right” or is “feeling down”

SIGNS OBSERVED BY PARENTS/ GUARDIANS:

• Appears dazed or stunned • Is confused about assignment or position • Forgets an instruction • Is unsure of game, score, or opponent • Moves clumsily • Answers questions slowly • Loses consciousness (even briefly) • Shows mood, behavior, or personality changes

DANGER SIGNS

Be alert for symptoms that worsen over time. Your child or teen should be seen in an emergency department right away if s/he has: • One pupil (the black part in the middle of the eye) larger than the other • Drowsiness or cannot be awakened • A headache that gets worse and does not go away • Weakness, numbness, or decreased coordination • Repeated vomiting or nausea • Slurred speech • Convulsions or seizures • Difficulty recognizing people or places • Increasing confusion, restlessness, or agitation • Unusual behavior • Loss of consciousness (even a brief loss of consciousness should be taken seriously)

WHAT SHOULD YOU DO IF YOU THINK YOUR CHILD HAS A CONCUSSION?

1. SEEK MEDICAL ATTENTION RIGHT AWAY A health care professional will be able to decide how serious the concussion is and when it is safe for your child to return to regular activities, including sports.
2. KEEP YOUR CHILD OUT OF PLAY. Concussions take time to heal. Don’t let your child return to play the day of the injury and until a health care professional says it’s OK. Children who return to play too soon - while the brain is still healing - risk a greater chance of having a second concussion. Repeat or later concussions can be very serious. They can cause permanent brain damage, affecting your child for a lifetime.



3. TELL YOUR CHILD'S COACH ABOUT ANY PREVIOUS CONCUSSION. Coaches should know if your child had a previous concussion. Your child's coach may not know about a concussion your child received in another sport or activity unless you tell the coach.

HOW CAN YOU HELP YOUR CHILD PREVENT A CONCUSSION OR OTHER SERIOUS BRAIN INJURY?

Ensure that they follow their coach's rules for safety and the rules of the sport. • Encourage them to practice good sportsmanship at all times. • Make sure they wear the right protective equipment for their activity. Protective equipment should fit properly and be well maintained. • Wearing a helmet is a must to reduce the risk of a serious brain injury or skull fracture. • However, helmets are not designed to prevent concussions. There is no "concussion-proof" helmet. So, even with a helmet, it is important for kids and teens to avoid hits to the head.

HOW CAN I HELP MY CHILD RETURN TO SCHOOL SAFELY AFTER A CONCUSSION?

Children and teens who return to school after a concussion may need to: • Take rest breaks as needed • Spend fewer hours at school • Be given more time to take tests or complete assignments • Receive help with schoolwork • Reduce time spent reading, writing, or on the computer Talk with your child's teachers, school nurse, coach, speech-language pathologist, or counselor about your child's concussion and symptoms. As your child's symptoms decrease, the extra help or support can be removed gradually.

JOIN THE CONVERSATION
www.facebook.com/CDCHeadsUp
TO LEARN MORE GO TO >> WWW.CDC.GOV/CONCUSSION

I have read and understand the importance and risks of concussion. I understand I can download this information or request from the league.

Name of parent/guardian: _____

Parent guardian/signature: _____ Date signed: _____

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2025 SJVYFL ATHLETES and PARENTS CODE OF CONDUCT

All Athletes shall recognize that being a member of the community carries with it responsibilities and rewards and they shall not only embrace those responsibilities, but also conduct themselves both on and off the playing field/facility in a way that exhibits respect for others and themselves. All parents and guardians shall pledge to provide positive support, care and encouragement for their Athletes as well as SJVYFL staff and volunteers participating in the activities of San Joaquin Valley Youth Football League by following this Code of Conduct. All Parents and athletes must abide by our safety standards and commit to viewing all safety information pertaining to concussion and safety protocol as provided by the SJVYFL and its chapters.

All ATHLETES shall conduct them self with dignity as an athlete and as a citizen of the community, recognizing and accepting that they agree to:

1. Accept accountability for all behavior and its outcome.
2. Honor obligations and promises.
3. Exercise self-control.
4. Be willing to be fair with others in dealings on and off the playing field/facility.
5. Take pride in themselves and their accomplishments, but never at the expense of demeaning another person or group.
6. Respect the effort of others.
7. Respect authority.
8. Follow team rules.
9. Be honest.
10. Have the courage to do the right thing.
11. Demonstrate loyalty to family, friends and teammates.
12. Treat others with respect.
13. NOT use offensive language and taunting.
14. Use self-control and self-discipline.
15. Be accountable for all choices and actions.
16. Demonstrate reliability.
17. Exhibit supportive behavior and a positive attitude.
18. Adhere to all rules, policies and guidelines.
19. Demonstrate cooperation.



20. Properly care for all equipment, uniforms, facilities, and playing fields.

All PARENTS AND GUARDIANS shall conduct themselves with dignity as a citizen of the community, recognizing and accepting that they shall:

1. Encourage good sportsmanship by demonstrating positive support for all players, coaches and officials at every game, practice or other youth sports event.
2. Place the emotional and physical well being of their Athlete and the other Athletes ahead of a personal desire to win.
3. Support coaches and officials working with their Athlete, in order to encourage a positive and enjoyable experience for all.
4. Demand a sports environment that is free of drugs, tobacco and alcohol and refrain from their use at all youth sports events
5. Do the very best to make youth sports fun, and remember that it is a game for youth.
6. Encourage their Athlete to treat other players, coaches, spectators, officials and others with respect regardless of race, sex, creed or ability
7. Promise to help their Athlete enjoy the youth sports experience in whatever way possible, such as being a respectable fan, assisting with coaching, volunteering as need or providing transportation.
8. Be accountable for guests' behavior they bring to a game, practice or other youth sports event.
9. Be honest and have the courage to do the right thing.
10. NOT use offensive language and taunting.
11. Use self-control and self-discipline.
12. Be accountable for all choices and actions.
13. Exhibit supportive behavior and a positive attitude.
14. Adhere to all rules, policies and guidelines.
15. Respect authority and demonstrate cooperation.
16. Properly care for all equipment, uniforms, facilities, and playing fields.

We, the Athlete and Parent or Guardian, consent to follow the Code of Conduct as set forth by the San Joaquin Valley Youth Football League. **We, The Athlete and Parent of Guardian acknowledge social media bashing on individuals/league team sites, message boards, Facebook or San Joaquin Valley Youth Football site will Not be tolerated. Any of these actions will result in removal of the team/organization.** The Athlete and Parent or Guardian agrees to follow the rules and guidelines provided in this document as well as rules set forth by SJVYFL and NFHS. We, the Athlete and Parent or Guardian acknowledge that SJVYFL reserves the right to enforce



disciplinary actions NOT limited to but can include: suspension, fines, disqualification of play, removal from SJVYFL events if there has been ANY violation of this agreement deemed by the SJVYFL. These actions can be taken against players, teams, chapters, as well as Parent/Guardians.

PHOTO / VIDEO DISCLOSURE STATEMENT:

The SJVYFL and its affiliated members may on occasion take photographs and/or video of its members or program participants for use in print materials or by electronic methods. Your entry into SJVYFL facilities, participation in SJVYFL programs or participation in SJVYFL events grants permission for the SJVYFL to use these photographs and/or video in its marketing and public relations efforts.

EMERGENCY MEDICAL AUTHORIZATION:

I, as parent of said candidate/minor, do hereby authorize and direct the said association to act as agent for me to consent to and obtain medical, surgical, dental treatment and/or examination for said minor in case of illness or injury occurring from participation in any activities. I do hereby consent to any x-ray, examination, anesthesia, medical, or surgical, or dental treatment that is considered necessary by the attending physician or dentist. I understand that in an emergency reasonable effort will be made to notify me.

I, as parent/guardian of said candidate/minor, hereby given permission for said minor to participate in any and all the activities sponsored by said association and agree to release, indemnify and to hold harmless San Joaquin Valley Youth Football League including but not limited to it's organization, sponsors, supervisors, leaders, participants, officials, coaches and other agents or representatives including persons transporting said minor, from any and all claims out of injury to the above said minor except to the extent of, and in the amount of, insurance coverage held by the association.

ELIGIBILITY:

I, as parent of said candidate/minor and I, as said candidate/minor, understand that a candidate must meet the maximum age and weight requirement on official certification date established by Valley Youth Football certification and that it is the responsibility of the parent/guardian and the candidate/minor to provide such proof of age in the form of a certificate of birth record to the participating chapter and Valley Youth Football. I understand that if proof of age is not provided on certification date, said candidate/minor is automatically ineligible for participation in all and any activities of the chapter and/or the Valley Youth Football as a player.

EQUIPMENT RESPONSIBILITY:

I, as parent/guardian of said candidate/minor do hereby assume full complete responsibility for the proper care and maintenance of all equipment issued by the chapter to said candidate/minor. I understand all equipment is to be used for the chapter and/or Valley Youth Football activities only and that all equipment remains the legal property of the chapter. I agree to reimburse the chapter for any and all equipment that is lost or damaged or stolen for the value



stated by chapter with payment due when the equipment is returned. All equipment will be returned immediately upon the withdrawal of the said candidate/minor from the chapter.

*I have read and understand the **ATHLETES and PARENTS CODE OF CONDUCT, PHOTO / VIDEO DISCLOSURE STATEMENT, EMERGENCY MEDICAL AUTHORIZATION, ELIGIBILITY, and EQUIPMENT RESPONSIBILITY**. I understand I can download this information or request from the league.*

Player Name: _____

Name of parent/guardian: _____

Parent guardian/signature: _____

Organization: _____

Date signed: _____

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