



TIGERS IN TRAINING WOODLAKE

2024 YOUTH FLAG FOOTBALL CLINIC

SATURDAY, JUNE 22ND

WHS FOOTBALL FIELD

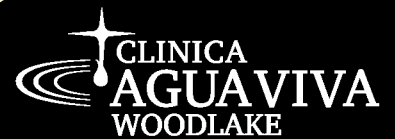
AGES 5-7 @ 10:30-11:30AM | AGES 8+ @ 12:30-2PM

\$20

PER PLAYER

Cost includes a t-shirt (thanks to Living Water Clinic & State Foods!) and fundamental instruction by the WHS Football Team!

Proceeds go to the WHS Football Team as a fundraiser for their program. Pay with credit card at City Hall or over the phone. Day-of registration (if spots are available) will be cash-only.



QUESTIONS / REGISTRATION:

www.CityOfWoodlake.com/Recreation

JReynolds@ci.woodlake.ca.us

City Hall: 350 N. Valencia Blvd.



2024 TIGERS IN TRAINING FLAG FOOTBALL CLINIC



PLAYER'S NAME: _____ AGE AS-OF JULY 1st 2024: _____

DOB: _____ GENDER: _____ CURRENT GRADE IN SCHOOL: _____

PLAYER'S T-SHIRT SIZE: Youth X-Small Youth Small Youth Medium Youth Large
 Adult Small Adult Medium Adult Large

CITY OF RESIDENCE: Woodlake Elderwood Lemon Cove Three Rivers Badger Ivanhoe Seville Exeter Visalia

PARENT/GUARDIAN 1: _____ CELL #: _____

PARENT/GUARDIAN 2: _____ CELL #: _____

Any physical conditions the instructors should be aware of: _____

(initials)

PHOTOGRAPHY / VIDEO RELEASE

I understand that the City of Woodlake Parks and Recreation may take pictures and/or video for use in a City publication, educational purposes or social media posts. My initials indicate approval for the use of such photography/video in which I or my child may appear. I understand that I will not receive compensation for the use of the pictures/video.

(initials)

REFUND POLICY

I understand that the City of Woodlake Parks and Recreation, as a rule, does not offer refunds. Your registration is a donation to the Woodlake High School Football program. Special situations can be discussed.

(initials)

MEDICAL RELEASE

I hereby give consent for the previously-mentioned player to participate in the City of Woodlake Parks and Recreation Programs during the current season. I give permission to the league, its officers, or representatives, to provide medical treatment in case of an emergency or injury to the above registered player.

CITY OF WOODLAKE PARKS AND RECREATION RELEASE WAIVER OF LIABILITY AND ASSUMPTION OF THE RISK AGREEMENT FORM. READ CAREFULLY BEFORE SIGNING

In consideration of being allowed to participate in the **City of Woodlake Parks and Recreation**, athletic sports or recreation programs, and related events and activities, the undersigned acknowledges, appreciates, and agrees that **the risk of serious injury including, but not limited to, permanent paralysis, injury, and death, is significant and does exist, even though particular rules, equipment, and personal discipline may reduce the risk.**

Therefore:

- 1) I **KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS**, both known and unknown, **EVEN IF ARISING FROM THE NEGLIGENCE OF THE CITY OF WOODLAKE** or others, and assume full responsibility for my participation;
- 2) I willingly agree to comply with the stated and customary terms and conditions of participation. **IF I OBSERVE ANY UNUSUAL SIGNIFICANT HAZARD DURING MY PRESENCE OR PARTICIPATION, I WILL EITHER REMOVE THE HAZARD, IF POSSIBLE, OR DISCONTINUE MY PARTICIPATION** and/or bring such hazard to the attention of the nearest official immediately; and
- 3) I **WILLINGLY AGREE TO COMPLY WITH ALL STATE GUIDELINES** as directed by the State of California for participation and spectating in regard to **PROTECTION AGAINST INFECTIOUS DISEASE INCLUDING COVID-19.**
- 4) I, for myself, my heirs, assigns, personal representatives and next of kin, hereby **RELEASE AND HOLD HARMLESS** the City of Woodlake, their officers, officials, agents, employees, volunteers, other participants, sponsors, advertisers and owners and lessors of the premises used to conduct the event, for **ANY AND ALL INJURY, DISABILITY, DEATH**, or loss or damage to person or property, **ARISING FROM THE NEGLIGENCE** of the above named organization.

This is to certify that I, as parent or legal guardian, have **LEGAL RESPONSIBILITY** for this participant. I have read and understand the significance of this **RELEASE AND WAIVER** and do consent and agree to his/her waiver, release and assumption of the risk as provided above. I release and agree to indemnify and hold harmless the City of Woodlake and associated persons from any and all liabilities for injury or damage to the above minor while participating in these programs **ARISING FROM THE NEGLIGENCE** of the City of Woodlake and associated persons.

Parent/ Guardian Signature

Date