

PLAYER'S NAME _____

**NORCAL FEDERATION FOOTBALL
NOTICE TO PLAYERS & PARENTS**

SECTION I

Norcal Federation Football League will not be responsible for **unsupervised** players or Cheerleaders, neither before or after a scheduled game, practice or event. Norcal Federation Football is not responsible for players or cheerleaders if they show up more than one hour prior to game time, or more than 15 minutes prior to practice, nor after a sponsored activity is over.

SECTION II

As a parent of guardian if I am called upon or volunteer to transport any participants, including players, cheerleaders or volunteer workers by motor vehicle, I realize Norcal Federation Football does not have Liability Insurance relating to transportation coverage, therefore, there would be **NO COVERAGE BY NORCAL FEDERATION YOUTH FOOTBALL.**

I FURTHER RELIEVE Norcal Federation Football of all liabilities arising out of the use of an automobile and will be fully responsible for any lawsuits arising out of the use of an automobile involving a Norcal Federation Football Function.

SECTION III

Norcal Federation Football has a Medical Accident policy which is **SECONDARY COVERAGE** for injury to your child; **COVERAGE MAXIMUM IS ONE HUNDRED THOUSAND DOLLARS. YOUR MEDICAL INSURANCE AND/OR MEDI-CAL IS PRIMARY COVERAGE.**

Norcal Federation Football's Accidental Medical Coverage has a \$100.00 (One Hundred dollar deductible).

Please Initial one of the following:

____ **MY MEDICAL INSURANCE COMPANY** _____
POLICY NUMBER _____

Or

____ **I CURRENTLY HAVE NO INSURANCE COVERAGE**

This form will not be accepted unless the name and policy number is filled in. If you do not have medical insurance and/or Medi-cal, please indicate.

YOUR CHILD WILL NOT BE ALLOWED ON THE FIELD FOR PRACTICE UNTIL THIS FORM IS COMPLETED AND SIGNED.

I have read and understand that Norcal Federation Football League is not responsible for the Liability or Injury to my child under any circumstances other than Norcal Federation Football League sanctioned and scheduled events and the above Guide lines will apply in all cases.

SECTION IV

I _____ am the parent and/or Legal Guardian of _____. In case of any medical emergency, I hereby authorize a representative of Norcal Federation Football to seek Medical Assistance for my child. *I also understand that my child's participation in youth football or cheerleading is purely voluntary and I agree to hold NorCalFed harmless for any and all liability for any injuries including death which my child may sustain while participating in this activity.*