

Red & Black Youth Football Clinics Grades 3<sup>rd</sup> - 5<sup>th</sup> ; Grades 6<sup>th</sup> - 8<sup>th</sup> Date: Saturday, January 29th, 2022 Location: Salesian College Preparatory



# Check-in/At the Door Registration:

Grades 3<sup>rd</sup> - 5<sup>th</sup>: 8:45AM Grades 6<sup>th</sup> - 8<sup>th</sup>: 11:45AM

# **Duration:**

Grades 3rd - 5th: 9AM - 10:30AM Grades 6th - 8th: 12PM - 1:30PM

## <u>Coaches ask that you please bring</u> <u>cleats, appropriate athletic gear,</u> <u>masks, and bottled water to the clinic</u>

This Youth Football Clinic is specifically tailored for the Grades 3rd through 8th youth interested in improving their fundamental football skills. The clinic is led by Salesian College Preparatory Head Coach Chad Nightingale and members of his coaching staff. Coach Nightingale has many years of football coaching

experience at the high school level, including two consecutive state championships. The staff is expected to include David Jobe, Victor Minchillo, Jordan Cole, Mike Hernandez, Prentiss Reid, Delon Craft, and Marcus Julian of the Salesian Pride Football Team. Salesian College Preparatory

# RED & BLACK YOUTH Football Clinic Masks likely required

Registration Fee: \$10.00

Please make checks payable to: "Salesian College Preparatory"

For registration, please send a check, a completed copy of this form, a completed Sports Participation Release Form, and a completed COVID-19 Student Waiver by January 29th, 2022 to:

R & B Youth Football Salesian College Preparatory 2851 Salesian Avenue Richmond, CA 94804

Player Name:	Player Grade (2021-2022):
Current School:	Parent Name:
Address:	Email Address:
Phone Number:	Date:

For more information please contact Coach Chad Nightingale at: cnightingale@salesian.com

# (COMPLETE SPORTS PARTICIPATION RELEASE FORM AND COVID WAIVER ON REVERSE SIDE)

#### Sports Participation Release and Photo Form - Red & Black Youth Football Clinic

Dear Coach,

I hereby give my consent for (print) \_\_\_\_\_\_\_\_\_\_\_to participate in camps or clinics for the Red & Black Youth Football Clinic at Salesian College Preparatory. In rare instances, a medical or surgical emergency requiring treatment arises in which written consent by parents or a guardian is legally required, but the proper person cannot be located. In this event, and in order to avoid delay that might jeopardize the life or health of my child, I hereby provide the following permission, with the understanding that reasonable effort will be made to contact me in an emergency. I hereby grant permission to medical personnel rendering care to my child to accept from the staff of Salesian College Preparatory which includes its coaches, and any other guest coaches that the camp utilizes permission and consent for emergency medical and dental evaluation and treatment, including, but not limited to diagnostic, drug, and/or alcohol testing and/or surgical procedures on my child. I further give Salesian College Preparatory staff and the guest coaches permission to release pertinent health information concerning my child to the treating hospital and/or physician permission to release copies of all medical records, laboratory and radiology reports to Salesian College Preparatory staff.

I agree that I will be responsible for any medical/pharmaceutical costs incurred that are not covered by medical insurance. I also agree that Salesian College Preparatory, including its staff, agents or employees, and the camp's guest coaches will not be liable for unknown or unforeseen conditions arising from medical/nursing treatment or medications received by my child.

I voluntarily agree, covenant and promise to accept and assume all responsibilities, and risk for injury, death, illness or disease or damage to myself, my child identified above, or to my property arising from my child's participation in the sport identified above, and the use of the premises, facilities, equipment and services offered by Salesian College Preparatory in connection with such sport. I, for myself and for my child, voluntarily release and forever discharge and covenant not to sue Salesian College Preparatory and its staff including its coaches, agents or employees, and all other persons or entities affiliated with the camp, from any and all liability, claims, demands, actions or rights or action, which are related to, arise out of, or are in any way connected with my child's participation in the camps specified above, any and all activities related to such sports, and the use of the premises, facilities, equipment and services offered by Salesian College Preparatory and its staff, including its coaches agents or employees or guest coaches. I further agree, promise and covenant, on behalf of myself and my child specified above, to hold harmless and to indemnify Salesian College Preparatory and its staff, including attorney's fees, or from any other costs incurred in connection with claims for bodily injury, wrongful death or property damage brought by me, my child, or on our behalf.

My child suffers from the following physical conditions that might result in emergency care, e.g., Diabetes, asthma, hypertension, epilepsy, etc.,; None, except for any listed below:

My child is not allergic to any drugs except:

I further acknowledge that I am in the best position to determine the physical ability of my child to participate in the sports outlined above, and acknowledge that my child is in good physical and mental health, and is not suffering from any condition, disease or disablement which would or could potentially adversely affect participation in the sport.

I understand that any photograph, sound recording, motion picture, or video taken of me or the minor child attending the clinic is for the purpose of promoting the public good and the interests of Salesian College Preparatory. I hereby assign all rights, title and interest including copyright in and to any or all photographs, sound recordings, motion pictures, or videos to Salesian College Preparatory and authorize its agents and employees without limitation to reproduce, copy, sell, exhibit, publish, or distribute such in any medium now known or later developed, in perpetuity. I further release and forever discharge Salesian College Preparatory, its offices, agents, and employees from any and all claims and demands arising out of or in connection with the use of said photographs, etc., including but not limited to any and all claims for invasion of privacy, defamation, or infringement of copyright. I have read and understood the provisions of this agreement, and understand that I am free to obtain legal advice at my expense to interpret these provisions.

I HAVE READ THIS FORM, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS FORM IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

Signed:	Print Name:	Date:	
Address:	City:	State:	Zip:
Home Phone: () We	ork Phone: ()	_ Cell Phone: ()	
Email Address of Parent/Guardian:	Player's	Name:	Birth Date://

Student Name:

## COVID-19 PANDEMIC STUDENT WAIVER AND CONSENT FORM (August 9, 2021)

### Salesian College Preparatory

### Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. **Over 600,000 people in the United States have died from COVID-19 as of the date of this form.** As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

Salesian College Preparatory has put in place preventative measures to reduce the spread of COVID-19; however, Salesian College Preparatory cannot guarantee that a student or their family or friends or to anyone with whom such persons may have contact, will not become infected with COVID-19. Further, attending any activities associated with Salesian College Preparatory such as but not limited to attendance at school, attendance for athletics, through a club or other co-curricular activity, a school function of any sort on or off its campus ("School Function") could increase the risk to a student or their family or friends of contracting COVID-19.

The undersigned parent or guardian ("Parent") of the student named below ("Student") confirms that the Student has not as of the date next to the signature below ("Effective Date") tested positive for COVID-19, and as of the Effective Date is not presenting any of the following symptoms of COVID-19 listed here: Fever above 100 degrees Fahrenheit, chills, shortness of breath or difficulty breathing, new loss of taste or smell, dry cough, newly exhibited congestion or runny nose, sore throat, fatigue, muscle or body aches, headache, nausea or vomiting, or diarrhea ("Symptoms").

## Parent/Guardian Initial:

Parent agrees that on any date when Student has any one of the Symptoms that Student shall not be allowed to attend any School Function.

Parent/Guardian Initial:

By signing this agreement, Parent acknowledges the contagious nature of COVID-19 and voluntarily assumes the risk that Student or Student's family or friends, or anyone who has contact with such persons may be exposed to or infected by COVID-19 because Student attended a School Function and that such exposure or infection may result in personal injury, illness, permanent disability, and death to Student or Student's family or friends, or to anyone with whom such persons may have contact. Parent understands that the risk of becoming exposed to or infected by COVID-19 may result from the actions, or negligence of Parent, Student, and others, including, but not limited to, Salesian College Preparatory employees, volunteers, students, and program participants and their families.

Parent voluntarily agrees to assume all of the foregoing risks and accept sole responsibility for any injury to Student, or Student's family or friends, or anyone who has contact with such persons (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that Parent or Student or others may experience or incur in connection with Student's attendance at any School Function.

On my behalf of Student, or Student's family or friends, or anyone who has contact with such persons, Parent hereby releases, covenants not to sue, discharges, and holds harmless Salesian College Preparatory, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating to the attendance at a School Function.

Parent/Guardian Initial:

Parent understands and agrees that this release includes any Claims based on the actions, omissions, or negligence of Salesian College Preparatory, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any School Function.

Parent/Guardian Initial:

Parent agrees to abide by any and all Rules and Regulations promulgated by Salesian College Preparatory concerning COVID-19 or related issues as amended from time to time by Salesian College Preparatory ("Salesian COVID Rules and Regulations"), which such regulations shall be promulgated by placement on the website, sent out via email or posted on Schoology or other Salesian College Preparatory system for contacting students and parents.

Parent/Guardian Initial:

Parent understands and consents to Salesian College Preparatory's employees, agents, or affiliates taking Student's temperature and observing Student for Symptoms and if any Symptoms are present Parent shall arrange for immediate removal of Student from the premises of Salesian College Preparatory and shall look to Salesian COVID Rules and Regulations daily for any changes.

Parent/Guardian Initial:

Print Name of Student

**Print Parent/Guardian Name** 

Signature of Parent/Guardian

Date