

# Cleveland Youth Running Club

General Release for Athletic Training



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The undersigned is registering individually or as the parent/legal guardian of a minor, child or both. As used on registration form, registrant is an adult registering for an activity individually or as a parent/legal guardian of a minor, child or both. I recognize the possibility of physical injury associated with the participation with Cleveland Youth Running Club. I hereby assume any RISKS and release, discharge and otherwise indemnify the Cleveland Youth Running Club USATF Club, its officers, its coaches, its board of directors against any claim for injuries received by the registrant {and/or minor(s)} as a result of participation with Cleveland Youth Running Club, or during transportation to or from practice/competition. The undersigned hereby gives consent for participation with Cleveland Youth Running Club. In addition, the undersigned gives consent for emergency care prescribed by a duly licensed physician or dentist. This care may be given under whatever circumstances necessary to preserve the life, limb or well being of the registrant and or minor(s). In addition, all participants must have medical health insurance.

Date: \_\_\_\_\_

Name of Athlete/Participant: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name of Emergency Contact Parent/Legal Guardian: \_\_\_\_\_

Emergency Contact Cell Phone: \_\_\_\_\_ Relationship to Minor: \_\_\_\_\_

Signature (Parent signature if under 18 years): \_\_\_\_\_

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Live - Learn - Listen - Have Fun - Compete - Win