



# SAGINAW ATHLETIC CLUB



Parent Name:  Child(s) name:  Age:

Address:  Phone:  DOB:

Email:  School Name:

Yrs of Exp:  Total Due:  Total Paid:  Date Paid:

Jersey Size: YOUTH - S  M  L  XL  ADULT - S  M  L

**Parent/Player Code of Conduct Agreement:** All Coaches, Parents, and Players are expected to demonstrate good sportsmanship, responsibility, caring, positive attitude, and most importantly RESPECT toward all Coaches, Teammates, Officials, Spectators, and SAC Staff at all times: Regardless of calls made, outcome of the game, or any disagreements . I understand and agree that if I fail to abide by these expectations during all games and practices, I will be subjected to disciplinary action that could include, but not limited to the following:

- Verbal Warning by game official, head coach, and/or head of league organization
- Individual Player - Game or Season suspension/ without a Refund
- Game unsportsmanlike Conduct penalty against the team
- Team Game Forfeit

Parent Initials:

(Type in your initials )

Player Initials

(Type in your initials)

Release of Liability:

I,  parent of  agree for my child to participate in the activity at my sole risk and responsibility. I release, indemnify and hold harmless Saginaw Athletic Club, its servants and agents, RCX Sports LLC, The National Football League, it's 32 professional clubs, NFL Ventures Inc, NFL Ventures LP, National Football League Foundation, NFL Properties LLC, and any of their respective related subsidiaries, entities, and affiliates ,from and against all and any actions or claims which may be made by me or on my behalf or by other parties for or in respect of or arising out of any injury, loss, damage or death caused to me or my property whether by negligence, breach of contract or in any way whatsoever. The Saginaw Athletic Club has my permission to use any pictures or videos taken during training or camps to be used for promotional/marketing materials, published articles or the Saginaw Athletic Club website.

Signature of Participant:

Signature of Parent/Guardian:   
(If under the age of 18, must have parent signature and information)

Emergency Contact Name:  Cell Number: