

VALLEY JEWISH COMMUNITY CENTER THE WAYNE LEAGUE YOUTH BASKETBALL PARTICIPATION FORM

(This form must be submitted prior to participation in the program)

Name (Participant)	Home Phone
Parent Email	Parent Cell Phone
Address	City Zip
Gender Identity (M) (F) (Other) Date of Birth	Age
School Grade	T-Shirt Size (Circle One) YS YM YL YXL AS AM AL AXI
Parents/Guardian Name(s)	
Coaches Name:	Team Name:

PARENTAL CONSENT, WAIVER OF LIABILITY AND MEDICAL RELEASE

In consideration for being permitted by Valley Jewish Community Center (VJCC) to participate in any and all of their activity/program offerings including the Wayne League Youth Basketball Program, I/We, the parent(s) or guardian(s) of the above-named child ("Participant") hereby give my/our approval to his/her participation in the Wayne League Youth Basketball Program. I/We assume all risks and hazards incidental to the conduct of the activities, and I/We hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which we may have, or which may here after accrue to us, as a result of the above-named child's participation in said activities. I/we state that the above-named child is physically able to participate in all VJCC activity/program offerings.

This release is intended to discharge in advance VJCC (including their officers, employees, volunteers, coaches, delegation administrators, organizing committee members, sponsors, and agents) from any and all liability arising out of or connected in any way with the above-named child's participation in VJCC programs/activities, even though that liability may arise out of active or passive negligence or carelessness on the part of the persons or entity mentioned above. It is further agreed that this waiver, release, and assumption of risk is to be binding on my heirs, administrators, executors, and assigns, and that I/we shall indemnify and to hold the above persons or entity (including their officers, employees, volunteers, coaches, delegation administrators, organizing committee members, sponsors, and agents) free and harmless from any loss, liability, damage, cost, or expense which may arise out of or is connected in any way with the above-named child's participation in VJCC programs/activities. Additionally, I/we fully understand that the above-named child's participation in the VJCC activity/program offerings exposes them to risk of personal injury, death, communicable diseases, illnesses, viruses, and/or property damage. I/we hereby acknowledge that the above-named child is voluntarily participating in the VJCC activity/program offerings and agree to assume any such risk.

I /We understand VJCC retains the right to use photos taken during activities for publicity or promotional purposes and hereby grant VJCC permission. I/We understand that VJCC has a code of conduct and agree to abide by its conditions.

Name (Participant)	_
COVID-19:	
The VJCC cannot guarantee, warrant, or protect you and/or your Child illness through participating in VJCC activity/program offerings. More participates in VJCC activity/program offerings to potentially infect otherisk for severe illness due to COVID-19. Additionally, there may be risks is known about the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2, the virus that causes COVID-19 is highly infectious, and through respiratory droplets produced when an infected person cough: has the virus on it and that persons infected with COVID-19 may s symptoms, which makes it more difficult to control the spread of COVIJCC activity/program offerings may increase participant's risk of expocontracting COVID-19 and transmitting COVID-19 to family members as	over, it is possible for you and/or your Child who ers, including family members, who may be at high that cannot be determined until more information SARS-CoV-2) and COVID-19. I/We understand that thought to spread mainly from person to person s or sneezes or by touching a surface or object that pread the virus when they are not showing any VID-19. I/we also understand that participating in sure to COVID-19 and my and/or my Child's risk of
I/we further understand that COVID-19 is associated with a serious ar Inflammatory Syndrome in Children (MIS-C).	nd potentially deadly condition called Multisystem
A link to current CDC information regarding COVID-19 can be found he ncov/index.html. A link to local Los Angeles County health information http://publichealth.lacounty.gov/acd/ncorona2019/.	
It is my responsibility to review this information and determine the risl is currently no vaccine to prevent COVID-19, and public health official Angeles County maintain that the best way to prevent contracting COVI by maintaining a physical distance of at least six (6) feet from others, a that participating in VJCC activity/program offerings, I/we and/or my Ch to maintain a physical distance of at least six (6) feet from others at all	als from the CDC, the state of California, and Los ID-19 is by avoiding exposure to the virus, including and avoiding gathering in groups. I also understand hild may be gathering in a group and may be unable
I/WE HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEAS AM/ARE AWARE THAT THIS IS A RELEASE OF LIABILITY AND I/WE SIGN	
Signature of Parent(s) or Guardian	Date
	Date