

ERMS Flag Football

Mondays & Wednesdays

2:50 to 4:00

9/4, 9/9, 9/16, 9/18*, 9/23, 9/25, 9/30

Please save the top section for your records.

*Tentative date (Rain Date for ERMS Back to School Bash)

Return the bottom section to ERMS, ATTN: Mr. Meyers

FLAG FOOTBALL REGISTRATION

Student Name:	
Grade:	
Homeroom Teacher/Room:	

WAIVER OF LIABILITY AND INFORMED CONSENT

I, _____, have enrolled my son/daughter, _____

in the ERMS Intramurals program. In consideration of my son's/daughter's participation in the activity, I hereby release the East Ridge Middle School and its participating instructors from any claims, demands and causes of action arising from my son's/daughter's participation in this program.

I agree to promptly pick up my child or arrange his/her transportation home following his/her practice.

I hereby affirm that my child is in good physical condition and does not suffer from any disability that would prevent or limit his/her participation in this program.

In the event I cannot be reached in an emergency and immediate medical care is required for my child without delay, I hereby give permission to the supervising adult to secure medical treatment including emergency services. I hereby give permission to the attending physician at the hospital to admit and secure proper treatment, including injections, anesthesia and surgery for my child.

Name of Parent or Guardian:	
Signature:	
Address:	
Phone:	
Emergency Contact & Phone if Parent cannot be reached:	