Metroplex Youth Football Association
7on7 Participation Roster and Waiver Form

Team Name: _____ Division: _____ Head Coach: _____

In consideration of being allowed to participate, each participant and his/her legal representative, **WAIVE ALL CLAIMS** for injury, accident of loss of any kind **AND HEREBY RELEASE METROPLEX YOUTH FOOTBALL ASSOCIATION, INC., ALL MYFA MEMBER ASSOCIATIONS**, facilities, sponsoring organizations, employees, members, agents, contractors and representatives from any and all losses, claims, damages and other liabilities arising from participation or attendance of any MYFA event. As further consideration to participation, each participant and his/her legal representatives are aware that MYFA's core principles are to teach the fundamentals of football, develop good character within each player, encourage the development of a physically fit body, create a healthy competitive spirit amongst players and ensure the safety of each player. Each participant and his/her legal representative agree to exhibit these principles and abide by all Metroplex Youth Football Association By-Laws and Rules while attending any Metroplex Youth Football Association games, events or any other activity.

Jersey #	Player Name	DOB	Age	Grade	Parent's Release & Waiver Signature

As a duly authorized team representative, I acknowledge, agree and confirm that all team representatives and coaches accept full responsibility for the conduct of team players, coaches and fans on and off the field and will promote only the best sportsmanship. I further agree that all players, coaches and fans will abide by Metroplex Youth Football Association's By-Laws and Rules.

Printed Name Head Coach: _____ Head Coach Signature: _____