

5th & 6th Grade Football Registration Form 2019

Dear Parents/Guardians of Minden Optimist Football Players:

The Optimists will check out football equipment on Monday, August 19th at 7:00 p.m. at the Minden Fire Hall.

There will be a \$100.00 deposit required for the equipment to be checked out to each individual. The deposit will be returned to you when the equipment is checked in at the end of the season. If you cannot attend please call Jason Holsten at (308) 830-0566. **PLEASE BRING DEPOSIT FEE TO CHECK OUT**.

Teams will be established prior to check out.

Please print this form off along with waiver and concussion form, fill them out and sign, and bring them to check out on Monday, August 19th. No equipment will be issued without the signature.

	CITY CITY
PARENT	APPROVAL
has	s my permission to participate in the Minden Optir
ot hold the Optimist Club, co	oaches and/or volunteers responsible for injuries o
during participation. I have	read and signed the liability waiver form.
	DATE
	ot hold the Optimist Club, c during participation. I have

MINDEN OPTIMIST CLUB WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

IN CONSIDERATION of being allowed to compete or participate in any way with the athletic activities -such activities being any organized practice, team competition, or other event related to an organized athletic or sporting event for which the Minden Optimist Club provides support through funds, equipment, or otherwise - I, the undersigned, for myself, my personal representatives, heirs, and next of kin:

- HEREBY, in full recognition. and appreciation of the dangers and risks inherent in such athletic activities, do waive, release, covenant not to sue, and forever discharge the Minden Optimist Club, its officers, agents and employees from and against any and all claims, demands, actions or causes of action for costs, expenses or damages to personal property or for personal injury or death, which may result from my participation in these athletic activities.
- 2. HEREBY ACKNOWLEDGE that participation in athletic activities carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks range from(1) minor injuries such as scratches, bruises, and sprains, (2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions, (3) catastrophic injuries such as paralysis and death.
- 3. HEREBY ACKNOWLEDGE that I have read the previous paragraphs, and I know, understand, and appreciate the risks that are inherent in athletic activities. I hereby assert that my participation is voluntary and that I assume all such risks.
- 4. HEREBY AGREE to indemnify and hold the Minden Optimist Club, its officers, agents and employees harmless from any all claims, actions, suits, procedures, costs, expenses, damages, and liabilities, including attorney's fees brought as a result of my involvement in the athletic activities and to reimburse them for any such expenses incurred.
- 5. HEREBY AGREE that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the laws of the State of Nebraska and that if any portion thereof is held invalid, it is agreed that the balance shall notwithstanding, continue in full legal force and effect.
- 6. HEREBY ACKNOWLEDGE that I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing freely and voluntarily and intend my signature to be a complete and unconditional release of liability to the greatest extend allowed by law.

Signature of Participant	Printed Name of Partici	pant Date	Age (if Minor)
Signature of Parent/Guardian	(if Participant is a Minor)	Printed Name of Parent/Guardian	Date



I acknowledge I have received, read and understand the provided concussion information and I am aware of my responsibility as it relates to my student athlete and agree to comply with the procedures as outlined.

Also, I am aware that additional information related to concussions is available at www.cdc.gov/headsup.

Student Athlete Name(s)		_
Signature of Parent/Guardian	Date	
Printed Name of Parent/Guardian		

A Fact Sheet for **YOUTH SPORTS PARENTS**



This sheet has information to help protect your children or teens from concussion or other serious brain injury.

What Is a Concussion?

A concussion is a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move quickly back and forth. This fast movement can cause the brain to bounce around or twist in the skull, creating chemical changes in the brain and sometimes stretching and damaging the brain cells.

How Can I Help Keep My Children or Teens Safe?

Sports are a great way for children and teens to stay healthy and can help them do well in school. To help lower your children's or teens' chances of getting a concussion or other serious brain injury, you should:

- Help create a culture of safety for the team.
 - > Work with their coach to teach ways to lower the chances of getting a concussion.
 - > Emphasize the importance of reporting concussions and taking time to recover from one.
 - > Ensure that they follow their coach's rules for safety and the rules of the sport.
 - > Tell your children or teens that you expect them to practice good sportsmanship at all times.
- When appropriate for the sport or activity, teach your children or teens that they must wear a helmet to lower the chances of the most serious types of brain or head injury.
 There is no "concussion-proof" helmet. Even with a helmet, it is important for children and teens to avoid hits to the head.

How Can I Spot a Possible Concussion?

Children and teens who show or report one or more of the signs and symptoms listed below—or simply say they just "don't feel right" after a bump, blow, or jolt to the head or body—may have a concussion or other serious brain injury.

Signs Observed by Parents

- Appears dazed or stunned.
- Forgets an instruction, is confused about an assignment or position, or is unsure of the game, score, or opponent.
- Moves clumsily.
- Answers questions slowly.
- Loses consciousness (even briefly).
- Shows mood, behavior, or personality changes.
- Can't recall events *prior to* or *after* a hit or fall.

Symptoms Reported by Children and Teens

- Headache or "pressure" in head.
- Nausea or vomiting.
- Balance problems or dizziness, or double or blurry vision.
- Bothered by light or noise.
- Feeling sluggish, hazy, foggy, or groggy.
- Confusion, or concentration or memory problems.
- Just not "feeling right," or "feeling down."

Talk with your children and teens about concussion. Tell them to report their concussion symptoms to you and their coach right away. Some children and teens think concussions aren't serious or worry that if they report a concussion they will lose their position on the team or look weak. Remind them that *it's better to miss one game than the whole season*.





A Fact Sheet for **ATHLETES**



WHAT IS A CONCUSSION?

works. It can happen when your brain gets bounced A concussion is a brain injury that affects how your brain around in your skull after a fall or hit to the head.

do if a concussion occurs. brain injury and know what to concussion or other serious help you protect yourself from This sheet has information to

WHAT SHOULD I DO IF I THINK







a doctor or other health care provider can return to play on the day of the injury. Only If you think you have a concussion, do not

OK to return to school and play. tell if you have a concussion and when it's A DOCTOR. OUT BY

GET CHECKED

playing with a concussion is dangerous best if you are not feeling well, and you or one of your teammates may have a concussion. You won't play your Encourage your teammates to also

report their symptoms. Tell your coach and parent if you think



TO HEAL.

make everyday activities, such as going to school, a couple of weeks. For some, a concussion can Most athletes with a concussion get better within parents and doctor about how you are feeling. to your normal activities. Be sure to update your harder. You may need extra help getting back



You may have a concussion if you have any of these symptoms **HOW CAN I TELL IF I HAVE** A CONCUSSION?

after a bump, blow, or jolt to the head or body:



••••• Get a headache



•••• Feel dizzy, sluggish or foggy



Be bothered by light or noise



Have double or blurry vision



•••••• Vomit or feel sick to your stomach



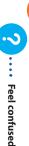
Have trouble focusing or problems



remembering



Feel more emotional or "down"



••••• Have problems with sleep

or days until you notice that something isn't right. concussion symptoms right away, but sometimes it takes hours to tell your parents and doctor how you feel. You might notice A concussion feels different to each person, so it's important



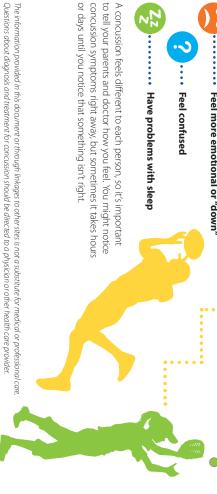


hits to the head and follow chances of getting a concussion the rules for safe play to lower All your teammates should avoid





need to get better. they should take the time they an important part of the team, and concussion, tell them that they're If one of your teammates has a







GOOD TEAMMATES KNOW: IT'S BETTER TO MISS ONE GAME THAN THE WHOLE SEASON



To learn more, go to www.cdc.gov/HEADSUP