PIEDMONT MIDGET FOOTBALL

Spring / Summer Workout Program

Beginning Monday, May 7th, 2018, Piedmont Midget Football League will start our off-season Workout Program to begin player conditioning, evaluation and instruction in preparation for the Fall 2018 football season. This program is voluntary, but highly encouraged for current 5th, 6th and 7th grade athletes wishing to play football in the fall. It will run twice a week in the evenings from 6:00pm – 8:00pm on the football practice field at Piedmont Recreation Association (Noel Williams Park. Interested athletes will need to bring the following to the first session on Monday, May 7th, 2018.

- Completed permission / waiver form (below)
- Cleats, running / shoes and water

Parents can drop off participants beginning at 6:00 pm at the football field at PRA. All participants must be picked up at the same location no later than 8:00 pm.

Piedmont Midget Football League

2018 Football Spring / Summer Workout Program

PERMISSION / LIABILITY WAIVER FORM

ATHLETE'S NAME: _____
PARENT'S NAME: _____
EMAIL ADDRESS: _____
ADDRESS: _____
HOME PHONE: _____ CELL: _____
SCHOOL: _____ CURRENT GRADE: _____
D.O.B:_____
EMERGENCY CONTACT NAME: _____
EMERGENCY CONTACT PHONE #: _____ PLAYED IN 2017? YES / NO

The Undersigned, as parent or legal guardian of the child named above, desires that my child participate in the Spring Workout Program offered by Piedmont Midget Football League. By completion of this release, I agree that all requirements, standards, and guidelines set by the coaching staff and personnel of the Program, use of equipment under supervision of the Program staff and personnel shall be deemed to have been accomplished for the benefit of my child.

In consideration of Piedmont Midget Football League efforts on my child's behalf, I do hereby voluntarily assume all risk of accident, injury, damage, or loss to my child's property which may arise out of my child's participation in the Program, hereby intending to release the State of North Carolina, Union County Public Schools, Piedmont Midget Football, Piedmont High / Middle School, the director, coaches, and personnel involved or otherwise from risks which may result from participation in the Program. Further, I acknowledge that I am responsible for providing primary medical insurance.

_____

Print Name: Signature of Legal Guardian: Date

Witness:

_____

Print Name Signature of PDMFL, Inc Representative Date