

# Must Be Notarized

## AGREEMENT TO PARTICIPATE

### A. Emergency Medical Authorization

I, or we, grant the officers, coaches, assistants, and board members, or assigned chaperones of this event to act as guardians/spokesmen in granting permission for emergency treatment/hospitalization (including anesthesia) if necessary for my child en route to or from or at the site of the AAU or USJVA event or hospital or other medical facility. I understand that should a health emergency arise, attempts will be made to notify me, but that if I cannot be reached by telephone such medial treatment as deemed necessary by competent medical personnel is authorized.

### B. AAU Publicity Release

I hereby authorize the AAU to allow the reproduction, dissemination, and/or publication of my name and likeness for media coverage, public relations, or any other purpose, which may involve the use of photographs, films and/or video tape recording. This is to be done in conjunction with my participation in AAU or USAV events, nor will I receive any payment for the possible commercial use of my name or likeness.

### C. Transportation

I understand that the parent or legal guardian is responsible for the transportation of their child to and from practice and AAU/USAV events, and said child will not be allowed to ride with a coach.

### AGREEMENT TO PARTICIPATE MUST BE SIGNED BY BOTH ATHLETE AND PARENT OR GUARDIAN!

\_\_\_\_\_  
(Signature of Athlete) (Date)

\_\_\_\_\_  
(Name of Parents) (please print, sign below)

Parent/Guardian Telephone numbers: Business Phone: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_\*

\* Cell # is optional, however it would provide one more opportunity to reach parents during an emergency.

Medical Insurance Company \_\_\_\_\_ Group # \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_ Phone \_\_\_\_\_  
(Please sign in view of notary)

Notary \_\_\_\_\_

Expires \_\_\_\_\_

Insurance: AAU membership provides excess medical insurance for any member athlete participating in an AAU-sanctioned practice or event. If the athlete has other medical coverage, such will be applied first, followed by AAU insurance