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 & Sonic Sports Club Inc. Publicity Release

I hereby authorize the AAU and Sonic Sports Club Incorporated 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, USAV, or Sonic Sports, Inc. 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!

Athlete's Signature _____ Date _____

Parent/Guardian Name(Print) _____ Date _____

Parent/Guardian Telephone Numbers
Home Phone _____
Cell Phone _____
Work Phone _____

Medical Insurance Company _____ Group # _____

Parent/Guardian Signature _____ Date _____
(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