



## Toledo CYO | Athlete Contract and Medical Release

Parish: \_\_\_\_\_ Year: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

\_\_\_\_\_  
PARENT/GUARDIAN NAME

\_\_\_\_\_  
RELATIONSHIP

\_\_\_\_\_  
PHONE NUMBER

\_\_\_\_\_  
EMAIL

\_\_\_\_\_  
PARENT/GUARDIAN NAME

\_\_\_\_\_  
RELATIONSHIP

\_\_\_\_\_  
PHONE NUMBER

\_\_\_\_\_  
EMAIL

### I. MEDICAL EXAMINER

The athlete named above has been examined by the Provider signing below and is in sound physical condition to compete/participate in the CYO Athletic Program.

☐ Cleared without restrictions.

\_\_\_\_\_  
WEIGHT

\_\_\_\_\_  
HEIGHT

\_\_\_\_\_  
DATE OF EXAM

\_\_\_\_\_  
NAME OF PHYSICIAN

\_\_\_\_\_  
SIGNATURE OF PHYSICIAN

\_\_\_\_\_  
DATE

### II. PARENT AND ATHLETE

We, the athlete and parent(s)/guardian(s), understand that participating in athletics involves the risk of serious or even fatal injury. In exchange for our child's opportunity to take part in this program, we, the parent(s)/guardian(s), individually and on the behalf of our child, specifically accept any risks related to and resulting from such participation, including but not limited to, physical and emotional injuries, during practice, competitive events, and any associated activities, including transportation to and from events by a volunteer. We hereby release the Diocese of Toledo, CYO, any parish/or school sponsor, and their agents from and hold them harmless against any liability for injuries or damages. We have provided the necessary Emergency Medical Authorization to the coach along with this Contract. We agree to follow CYO rules and guidance, the Parents' Code of Ethics, and instructions from game officials. We also permit the Diocese of Toledo, CYO, or their representatives to photograph our children for marketing and promotional purposes.

\_\_\_\_\_  
PARENT/GUARDIAN NAME

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

### III. PARENTS' CODE OF ETHICS

- I will place the emotional and physical well-being of my child ahead of any personal desire to win.
- I will demonstrate the Christian values of self-restraint, fair play, and sportsmanship in my treatment of others at every game, practice session, or other CYO event.
- I will ask my child to treat all players, coaches, fans, and officials with respect, regardless of race, sex, or ability.
- I will demand a drug, alcohol, tobacco, and weapon-free sports environment for my child and agree to assist by refraining from their possession and/or use at all CYO events.
- I will do my best to make my child's involvement with youth sports a positive experience, while always remembering that the game is for the youth, not the adults.
- I will ensure that my child is free from symptoms of illness before allowing him/her to attend a practice or competition.

I have read the above "Code of Ethics" and understand that my (our) failure to uphold any of these statements may lead to disciplinary action by the CYO Office, which may include, but is not limited to, the forfeiture of my right to watch my child participate in CYO athletic events.

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE