



## PLAYER INFORMATION

PLAYER'S NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/TOWN/PROV: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

HOME PHONE: ( ) \_\_\_\_\_ WORK PHONE: ( ) \_\_\_\_\_

CELL PHONE: ( ) \_\_\_\_\_ EMAIL: \_\_\_\_\_

HEALTH CARD #: \_\_\_\_\_

IN CASE OF EMERGENCY PLEASE CONTACT: \_\_\_\_\_

AT: ( ) \_\_\_\_\_ RELATION: \_\_\_\_\_

## MEDICAL INFORMATION

Please circle the condition if your child suffers from any of the following:

Diabetes	Asthma
Bed Wetting	Dizzy spells
Seizures of any type	Heart complaint
Migraine	Epilepsy
Heat exhaustion	Lung complaint
Blackouts	Other _____

**Allergies to:** Please note that in the instance of food allergies and intolerances we will need specific guidance on suitable alternatives well in advance.

Penicillin	Aspirin
Other drugs	Foods (specify) _____
Other allergies:	_____

**Is your child presently taking any drug, or medication, or under any type of treatment or have ANY condition of physical disability OR current injury? YES / NO**

If yes, please describe \_\_\_\_\_

**Has your child had, or been in contact with any infectious diseases (including normal childhood diseases) in the past three months? YES / NO**

If yes, please describe \_\_\_\_\_

I/We, the parent(s) or guardian(s), in consideration of your Junior Ravens Football Program and in permitting my/our child to play, waive any right to action that I/we may have on behalf of my/our child for any cause whatsoever and agree that this waiver may be pleaded as an estoppel to any action against the Program of it including any coaching, managerial or administrative personnel of the said Program. I/We further agree that I/we shall waive harmless, protect and indemnify the Program, or any representatives or agents of injury of the Program from any action that may be brought as a result of injuries of any nature whatsoever incurred by my/our child. Furthermore, I/we hereby forever release, discharge and hold harmless Junior Ravens Football, Carleton University, the Department of Recreation and Athletics, its directors, officers, employees, games officials, volunteers and representatives associated with my participation (hereinafter collectively referred to as the "Releasees") or agents for any injury, loss or damage to my/our personal property howsoever caused, arising out of or in connection with my/we taking in football activities and notwithstanding that the same may have been contributed to or occasioned by the negligence of Junior Ravens Football Program and its representatives or agents.

\_\_\_\_\_  
(Parent/Guardian's Signature)

\_\_\_\_\_  
Date