



Rex Putnam Youth Football
P.O. BOX 68212, Milwaukie, OR 97268
Tax ID #: 93-1314965

info@putnamyouthfootball.com
www.putnamyouthfootball.com

REX PUTNAM YOUTH FOOTBALL

PRIVATELY – PURCHASED HELMET AND/OR SHOULDER PADS

WAIVER OF LIABILITY, RELEASE, ASSUMPTION OF RISK, INDEMNITY

CAREFULLY READ AND COMPLETE THE FOLLOWING:

In consideration of my child's participation in the Rex Putnam Youth Football Association "RPYF" program and related activities (the "Program"), I, for myself, my child and our heirs, representatives, administrators, executors and assigns, knowingly and voluntarily, hereby acknowledge and agree as follows:

1. RPYF policy requires all participants to wear football helmets/shoulder pads provided by RPYF. I request a waiver of that policy in order to allow my child to wear a privately-purchased football helmet and/or shoulder pads.
2. I acknowledge and fully understand that RPYF recommends children wear RPYF provided football helmets/shoulder pads in order to minimize the risk of injury that is inherent in playing tackle football. I understand that privately purchased football helmets/shoulder pads may not offer the same degree of protection as those provided by RPYF and may pose an increased risk of injury. The risks may include, among other risks, bodily injury or death.
3. I represent that any privately-purchased football helmet that will be worn by my child in connection with his/her participation in the Program will be used and maintained in accordance with the manufacturer's specified requirements, will be maintained in a good state of repair, and will be adequate for the purpose of protecting my child from head injuries at all times during his/her participation in the Program. RPYF will not be responsible for any repairs found needed for the privately-purchased football helmet. I further represent that any such football helmet has been, or will be, reconditioned at least every two (2) years with a reconditioned sticker attached to the helmet.
4. I represent that any privately-purchased shoulder pads that will be worn by my child in connection with his/her participation in the Program will be used and maintained in accordance with the manufacturer's specified requirements, will be maintained in a good state of repair, and will be adequate for the purpose of protecting my child at all times during his/her participation in the Program. RPYF will not be responsible for any repairs found needed for the privately-purchased shoulder pads.
5. I acknowledge and fully understand that RPYF follows USA Heads –Up equipment safety program that outlines how to properly fit football helmets/shoulder pads. If a privately-purchased football helmet and/or shoulder pad does not fit within those set standards, the football helmet and/or shoulder pads will be rejected along with this waiver.
6. I agree to assume all risks and hazards inherent in providing my child a privately-purchased football helmet and/or shoulder pads for use in his/her participation in the Program. I further agree that I am solely responsible for, and will bear any and all costs and expenses of, any injury my child or any other child sustains and any medical attention and/or rescue services provided to my child or any other child in connection with, or arising from, my child's use of a privately-purchased football helmet and/or shoulder pads in his/her participation in the Program.
7. I acknowledge and agree that my child will obey all instructions from, and safety requirements of, RPYF in participating in the Program.
8. TO THE FULLEST EXTENT ALLOWABLE UNDER LAW, I WAIVE, RELEASE, FOREVER DISCHARGE, COVENANT NOT TO SUE, HOLD HARMLESS, AND AGREE TO INDEMNIFY RPYF and its officers, directors, agents, employees, coaches, and/or representatives, and/or all other sponsors of the Program and/or the agents and employees of such sponsors (collectively the "Released Parties"), from any and all claims, losses, damages (including direct, indirect, actual and consequential damages), demands, suits and/or other actions (collectively "Damages"), arising out of or in any way related to my child's use of a privately-purchased football helmet and/or shoulder pads in connection with his/her participation in the Program, notwithstanding that the Released Parties' negligence may have contributed to the Damages.



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I HAVE READ THIS DOCUMENT AND FULLY UNDERSTAND ITS TERMS. BY SIGNING THIS DOCUMENT, I VOLUNTARILY ACCEPT ITS TERMS AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW. I AGREE TO INDEMNIFY RPYF AS PROVIDED HEREIN. FURTHER, I AGREE IF ANY PORTION OF THIS DOCUMENT IS HELD TO BE INVALID OR UNENFORCEABLE, THE REMAINDER SHALL NOT BE AFFECTED.

Equipment Requiring Waiver

Youth Football Helmet:	Brand/size:
_____	_____
Year Purchased:	Year Reconditioned:
_____	_____
Youth Shoulder Pads:	Brand/Size:
_____	_____
Year Purchased:	

Heads-Up Football Equipment Sizing: Meets or does not Meet

Youth Football Helmet:

Youth Shoulder Pads:

Circle one: Approved Not Approved

Parent/Guardian Signature:	Date:
_____	_____
Parent/Guardian Printed Name:	

Equipment Manager Signature:	Date:
_____	_____

President or Vice President Signature:
