Goshen Junior Football League Incorporated Waiver

I give my consent for	to participate in the Goshen Junior
Football League, recognizing that the League is a contact football league open to 4th, 5th and 6th grade youths who have not reached their 13th birthday by August 1 and who weigh less than 225 lbs. I will review and I become familiar with the Goshen Junior Football League rules.	
as a result of bis participation in the Lea hereby release, waive and indemnify the	e Goshen Junior Football League, Inc., its participants from any liability resulting from any
injury or illness that my child may suffer. child in the event of injury or illness, or Tresulting from any injury or illness that m	s not carry any medical insurance to cover any I have medical insurance that will cover my agree that Twill pay all medical expenses by child may suffer while he participates in the hifying the League against any such expense.
I authorize the personnel of the Goshen Football League to act for me according to their best judgment in an emergency requiring medical attention.	
Parent or guardian Signature:	Date: